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ABSTRACT

Fourth in a series of seven volumes reporting the design, methodology, and findings of the 4-year National Day Care Home Study (NDCHS), this volume presents findings obtained from interviews with parents of children attending family day care. The central aim of the parent component of the NDCHS was to obtain descriptions of parents' needs, preferences, and satisfaction with their family day care arrangements. Chapter I, the introduction, discusses the increasing need for day care provision as more and more mothers of young children enter the labor force, outlines the purpose of the parent component of the NDCHS, and traces the importance of NDCHS findings for day care policy makers. The parent component study design, its research questions, its implementation, and the sample selection process are described in Chapters II and III. The remaining chapters describe data on the characteristics of parents who use family day care (Chapter IV), parental needs and preferences for care (Chapter V), parent expectations and satisfaction with care (Chapter VI), and cost of care (Chapter VII). The final chapter (Chapter VIII) summarizes major findings, describes those characteristics of family day care that are most important to parents, and presents a profile of consumers of family day care. (Author/MP)

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Family Day Care in the United States:

Parent Component

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VOLUMES IN THE FINAL REPORT SERIES ON THE NATIONAL DAY CARE HOME STUDY

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- Executive Summary (Abt Associates, Inc.) - Summarizes the findings from all study components including data on family day care providers, the children in their care, and the children's parents. Presents information on the nature of day care in each of the study settings and presents both cost and program data on family day care systems.
- Volume 1, The National Day Care Home Study Summary Report (Abt Associates, Inc.) - Details the issues outlined in the Executive Summary.
- Volume II, The Research Report (Abt Associates, Inc.) - Focuses on the caregiver and the children in her care and presents extensive descriptive and statistical analyses of the interview and observation data collected. Includes profiles of both the caregiver and the children in care; discusses the stability of the day care arrangements, the group composition of the family day care homes, and the costs of providing care. Concludes with a comparative analysis of the observed behaviors of caregivers and the children in their care.
- Volume III, Observation Component (SRI International) - Presents the findings from the observations conducted in day care homes in the three study sites (Los Angeles, Philadephia, and San Antonio) and detailed descriptions of the methodologies used.
- Volume IV, Parent Study Component Data Analysis Report (Center for Systems and Program Development, Inc.) - Presents the information provided by the parents of the children in the family day care homes; describes these parents, their needs and preferences for care, and their satisfaction with family day care; and describes child day care costs.
- Volume V, Family Day Care Systems Report (Abt Associates, Inc.) - Presents an extensive descriptive and statistical analysis of the day institutions that administer family day care systems. These systems are one of the principal mechanisms for providing subsidized day care in a family day care setting; the cost analyses in this volume are the first attempt to estimate the cost of providing such care.
- Volume VI, The Site Case Study Report (Abt Associates, Inc.) - Describes the status of family day care in each of the study sites based on interviews with knowledgeable respondents ranging from state licensing staff to day care advocates. This volume is intended to describe the context in which the study was conducted and thereby to provide the reader a fuller understanding of the study findings.
- Volume VII, the Field Operations Report (Abt Associates, Inc.) - Describes the steps used to implement the study in the three study sites.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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NATIONAL DAY CARE HOME STUDY

PARENT STUDY DATA ANALYSIS REPORT

November 17, 1980

Final Report, Volume IV

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Prepared for:

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NATIONAL DAY CARE HOME STUDY

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Ruth T. Perot, the Center's President, served as Corporate Monitor of the parent component. Her creativity and standards of excellence guided the design and implementation of the study. Jacqueline L. Davison was Project Director, Dr. William Ellis served as Principal Investigator, and Blanchita P. Porter was the Deputy Project Director.

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FOREWORD

The National Day Care Home Study, sponsored by the Department of Health and Human Services, Administration for Children, Youth and Families, was a four-year study of family day care designed to further the understanding of such care, its structure and place in the community, and its costs.

Family day care--child care provided in a home other than the child's own--constitutes the largest system of out-of-home care in the United States. Of the 7.5 million U.S. families who regularly use some form of care for their children for 10 hours a week or more, 45% place their children in family day care homes. Family day care encompasses a myriad of unique arrangements between families and caregivers, ranging from informal agreements between relatives and friends to highly structured formal operations. Family day care homes operate autonomously and within family day care systems or networks of homes, which may in turn be part of larger community agencies.

Despite the widespread use of family day care, little has been known about the range of typical family day care environments, the differences and similarities between regulated and unregulated homes, cultural patterns in caring for children, or dynamics of the family day care market. Similarly, little has been known about how best to support families and caregivers in providing high-quality care in home settings. As mothers of young children increasingly enter the labor force and more children need substitute care at younger ages than ever before, a critical need exists for high-quality care that meets the diverse needs in this country at a cost that parents and taxpayers can afford. This can be accomplished in part through development and implementation of sound standards for quality care, through training and technical assistance programs, through improvement of service delivery systems, and through strong support of parents in finding and maintaining child care that meets their particular family needs. The National Day Care Home Study was initiated to provide a comprehensive base of information to further the development of these important areas and to promote increased effectiveness and efficiency in the delivery of home-based care.

The National Day Care Home Study represents the first national study of family day care and the first attempt to describe the ecology of family day care as a complex social system. It is the first major study to examine simultaneously all the principal family day care participants--the caregiver, the children in care, their parents, and the community institutions that complete the day care milieu.

All major forms of family day care are represented in the National Day Care Home Study, including the first large sample of informal, unregulated family day care homes ever studied. This in itself constitutes an important breakthrough in family day care research, because the informal care arrangements that predominate in family day care are not easily identified in scientific sampling procedures. In addition, the National Day Care Home Study is the only study of national scope to observe systematically the care of children in home environments through the use of sophisticated and carefully tested instruments. Finally, the study focused on understanding the cultural diversity in family day care among three groups that together constitute the largest users of family day care: (non-Hispanic) Whites, (non-Hispanic) Blacks, and Hispanics.

The parent component of the National Day Care Home Study, which provides the basis for this report, was designed to describe parents' needs, preferences, and satisfaction with their day care arrangements. We wanted to describe the consumers who use family day care, how they go about selecting care, and what parents most want for themselves and their children.

Initiated in 1976, the National Day Care Home Study consisted of four research phases. Phase I was devoted to development of a research design capable of addressing major family day care research and policy issues. Phase II was the field implementation of the study in Los Angeles, the first of three urban sites; it was a large-scale pilot test of all design elements and field procedures. During Phase III, the study was extended to Philadelphia and San Antonio, the remaining research sites. Data from all three communities were analyzed and reported in Phase IV, the final stage of this study.

Responsibility for management of the National Day Care Home Study rested with the Administration for Children, Youth and Families, Day Care Services Division, in Washington, D.C. Four research organizations participated in the design and implementation of this research. During Phase I, development of the research, field management procedures, and interview instruments were carried out by Westat, Inc., of Rockville, Maryland; Abt Associates, Inc., of Cambridge, Massachusetts; and the Center for Systems and Program Development, Inc., of Washington, D.C. Caregiver and child observation systems were developed under a separate contract by SRI International of Menlo Park, California. Abt Associates, Inc., and the Center for Systems and Program Development, Inc., continued in Phases II, III, and IV as Research Contractors, and SRI International remained the Observation Contractor for the study. The organization of the National Day Care Home Study and contractor responsibilities are described in Appendix A.

In addition to the research organizations that conducted the National Day Care Home Study, a consultant panel was established during Phase I to provide important formative advice, consultation, and careful peer review throughout the study. The consultant panel, representing relevant research specialties, participated in the development of research questions and instrument design and provided thoughtful review of major study milestones. The panel included Black, White, and Hispanic consultants to ensure sensitivity to issues of concern for the populations most frequently served by family day care. In addition, minority group members of the panel formed a Minority Task Force to identify technical and policy issues of particular significance for minorities and to offer broad procedural guidelines for addressing these issues. (Appendix A includes a list of those who served on the consultant panel and the Minority Task Force.)

The Administration for Children, Youth and Families is proud to present this final report of the National Day Care Home Study, the Parent Study Component. The research was carefully conceived and executed and, we believe, substantially expands the base of knowledge about family day care. We are hopeful that this information will also be useful to others in the day care field as we strive together to promote the well being of our nation's children.

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Chapter 1.0

INTRODUCTION: THE PARENT COMPONENT OF THE NATIONAL DAY CARE HOME STUDY

1.1 The Demand for Day Care

In San Francisco, a child care referral service turns away each month 250 callers seeking infant care. In Washington, D.C., a local family day care system serving infants and preschool children has a waiting list of 400 families for 28 full-time infant care slots. In Wichita, Kansas, 19 slots in a new infant day care center were filled within days, and 40 families were on the waiting list. A recent newspaper article entitled "Job Trends Spur Need for Infant Day Care Centers" (Richards, 1979) reported these examples of the dramatic increase in the demand for day care for young children--a demand which is expected to continue growing in this decade.

The need for child care is associated with the increasing participation in the labor force of mothers of young children. The percentage of children under six years of age who have mothers working outside the home climbed from 28.5% in 1970 to 37.6% in 1977 (Richards, 1979). By the end of 1980 this figure is expected to reach 44.8%. Current economic pressures and the increase in the number of single parent households are major factors contributing to the number of working women. "The real median income of American families jumped 64% from

1950 to 1970, but has crawled up by less than 1% a year in the past decade. Weekly real take-home pay has been declining for two years" (Taber, 1980). The two-income family has become a necessity in many parts of the country. For example, between 1969 and 1979, the percentage of White families with more than one income earner climbed from 53.6% to 55.4%. Among Black families, however, there was a decrease of two-income families from 57.2% to 42.6% during the same period, indicating perhaps the effects of the recession and an increase in single parent households (Time, June 16, 1980). Census Bureau statistics indicate that single parent households increased by 79% from 1970 to 1979. This increase in one-parent families, due in part to more divorce and separation in American society, is among the most dramatic social developments of the decade. The figures show that among White families with children, 15% are one-parent families. Among Black families with children, the Census Bureau reported, 46% are headed by women (Rich, 1980).

It is clear, from labor market trends showing increased participation of women in the work force, that parents will be subject to enormous pressures to place their children in suitable child care arrangements. And what day care options are available to satisfy the demand?

Family day care--child care provided in a home other than the child's own home--constitutes the largest natural system of out-of-home care in the United States, both in terms of the number of families served and the number of children in care. This form of care represents the choice of 45% of the 7.5 million families who regularly use some form of care for their children ten hours a week or more. An estimated 1.3 million family day care homes serve approximately 2.4 million children full-time, that is, more than 30 hours per week. An estimated 2.8 million children are served 10-29 hours per week, and 16.7 million receive occasional care--less than ten hours per week. More than half the children in care are under six years of age; the greatest proportion of these are under three. Thirty percent are aged three to five. Family day care also represents the most prevalent mode of after-school care for the five million school children between six and 13 years of age whose parents work (Vol. II, Unco, Inc., 1975).

Center-based care--that is, full-time care in a facility serving 13 or more children under the age of 13--represents an option for comparatively few families seeking child care today. There are approximately 18,300 licensed day care centers in the 50 states and the District of Columbia serving about 900,000 children, most on a full-time basis (Coelen, Glantz, and Calore, 1978). Day care centers serve only about 10% of all children in care, and are for the most part limited to the preschool population, aged three to five years.

In-home care is care provided in the child's own home by a non-relative or by a relative who is not a member of the child's own household. Recent figures indicate that approximately 619,000 children receive care by a non-relative in their own homes for 30 hours a week or more. In-home care is frequently a preference of parents of school-aged children or of those with infants and toddlers. More than half the children served in their own homes are of school age; about one-fifth are preschoolers; and the remainder are infants and toddlers (Vol. II, Unco, Inc., 1975).

Family day care has in the past represented, and will continue to represent, a substantial segment of the day care market. For countless families, for reasons of availability, cost, and preference, family day care will be the most practical and feasible option. The newspaper article cited previously was disturbing because, while it mentioned family day care as the preference of parents of children under two years of age, it clearly implied that this form of care is most frequently custodial in nature. In contrast, Arthur Emlen noted (Emlen, Donaghue, and LaForge, 1971) that too few see family day care as a creative social achievement--an adaptation of family life that meets important needs of caregivers, the users of care, and the children in care. Given the ever-increasing demand for child care and the importance of early childhood experience, parents deserve to be informed about the strengths as well as the limitations of family day care.

1.2 Purpose of the Parent Component

Though it is extensively used, comprehensive knowledge about family day care has not been available. This form of care is largely informal and is privately arranged between parents and caregivers who are frequently friends, neighbors, or relatives. Up to 90% of family day care in this country is unregulated. In 1979, however, there were approximately 112,000 regulated family day care homes, serving an average of three children per home (Vol. II, AAI, 1980). Most regulated caregivers, like those who are unregulated, operate autonomously but are either licensed by or registered with a state agency. Of the regulated caregivers, approximately 30,000, serving at least 120,000 children, operate as part of day care systems--networks of homes under the sponsorship of an administrating agency. Sponsored homes, in general, serve children whose care is subsidized; often the provider has access to a range of services such as caregiver training and client referral.

Family day care homes have several other characteristics as well which make identifying and monitoring them difficult:

- They are invisible. Providers generally do not advertise, nor do they make many demands on community resources.
- They are short-lived. The attrition rate is substantial and turnover is rapid.
- Their operators may be unaware of or avoid licensing. Caregivers may not know of licensing requirements. Others avoid regulation because zoning ordinances may prohibit the operation of a day care home, or because they may not meet the licensing requirements.

Finally, most government involvement has focused on center day care. Largely because of its informal structure, family day care has not been able to compete for available day care dollars. It is because of these factors among others that family day care has eluded extensive study.

The National Day Care Home Study, initiated in 1976, is the first national study of family day care and the first attempt to obtain a comprehensive description of this form of care. The study examines all of the principal family day care participants--the caregivers, the children in care, the parents who purchase care, day care agency administrators, and community advocates. This approach recognizes that family day care is a rich natural resource--a complex social system that merits systematic examination.

The parent component of the study, conducted by the Center for Systems and Program Development, Inc. (CSPD), examined parents' needs, preferences, and satisfaction with their family day care arrangements. It is apparent that day care consumers do choose family day care. Little, however, has been known about why they select one form of care over another. When parents choose family day care over center care, for example, they may well consider some of the advantages often cited. Family day care is most likely more personalized; it is frequently in the family's neighborhood and thus offers convenience; it promotes a continuity of cultural and child-rearing values. Parents can place siblings with the same provider; family day care home schedules may be more flexible; and most likely the cost of care is less than for center-based care. On the other hand, parents may also weigh such disadvantages as the comparative instability of family day care and the possible lack of opportunities for appropriate cognitive and language development. Because family day care is largely unsupervised, parents may find it difficult to locate care and assess its quality.

Policy makers, advocates, and planners have to know how parents go about selecting care in order to assist them. They need to know what is important to parents about their caregivers, the other children in care, the activities in the home, and the home environment; why parents end their arrangements; and which factors contribute to satisfaction and stability. The parent component of the National Day Care Home Study presents information from responses by parents on these and other issues concerning their care arrangements.

1.3 The Parent Component and Policy Direction

Too frequently, child care policy, which includes regulations, training, financial subsidy, technical assistance, and the development of support models, has been directed exclusively toward providers. The inclusion of a parent component in the National Day Care Home Study indicates recognition that the interests of consumers and caregivers are not identical even though they share a common concern--the child in care. Services are needed that can reach parents and are responsive to parents' concerns.

Caregiver qualifications is one issue on which parents' requirements should be clarified. Do parents prefer experience to formal training? What kinds of experience qualify providers? If their caregivers were to receive in-service training, what kind of training would parents prefer that they have?

Licensing or regulating family day care homes is another problematic issue. Regulations vary in form and substance not only from state to state, but from community to community within states. Regulations differ in the way they define the family day care home and in how they establish such important policy variables as age mix, group size, and caregiver/child ratio. Critics of family day care charge that it is difficult to monitor and supervise homes, and that, further, licensing homes may mislead consumers because licensing does not guarantee quality. But do parents prefer to use a regulated home? Can the features of family day care that are most important to parents be regulated? Licensing homes may help to curb gross inadequacies, but if parents do not perceive regulation as important, it will not be a factor in their selection.

The data from the parent study can influence the focus and direction of federal, state, and local support of family day care. For example, when the patterns--the similarities and differences between care in sponsored, regulated, and unregulated homes--are examined in relation to parents' preferences, it may become evident that there is no "best family day care model." Parental preferences have a strong cultural basis. Agency-run homes, which frequently have highly structured operations and a system of related social services, may appeal to one group of consumers. Others, however, may prefer care by relatives, neighbors, or close friends in the community, perhaps perceiving that, through their relationship with the caregiver, they can exercise more control over what happens to their children during the day. These more informal arrangements are important to communities given the demand for care; most are and will remain unregulated.

The design of this study reflects a recognition that family day care is influenced by the culture, traditions, and values of the communities it serves. To the extent possible, government day care advocates and specialists must offer creative and responsive support, making available to consumers a range of choices that will continue to meet their requirements. The outcome of the National Day Care Home Study, and of the parent component in particular, will assist the efforts of policy-makers, advocates, consumers, and caregivers by providing a foundation of fact for that support.

1.4 Organization of the Report

Chapter 2.0 presents the research design of the parent component in detail and includes a discussion of the research questions. Chapter 3.0 describes the sample selection and study implementation. The remaining chapters describe data on the characteristics of parents who use family day care (Chapter 4.0), parental needs and preferences for care (Chapter 5.0), parent expectations and satisfaction with care (Chapter 6.0), and cost of care (Chapter 7.0). The final chapter summarizes major findings, describes those characteristics of family day care that are most important to parents, and presents a profile of consumers of family day care.

Other NDCHS reports are listed on the inside cover of this report. Study contractors are identified on the cover page.

Chapter 2.0

PARENT COMPONENT RESEARCH DESIGN

2.1 Prior Studies of Family Day Care

The central aim of the parent component of the National Day Care Home Study is to provide the Administration for Children, Youth and Families (ACYF) with descriptions of parents' needs, preferences, and satisfaction with their family day care arrangements. Prior to developing a set of research questions, defining parent study constructs, selecting variables, and, ultimately, developing the instruments, a perspective on the family day care arrangement had to be achieved. This task necessitated a review of recent family day care research.

For the most part, the considerable body of research in day care, child development, and compensatory education has ignored family day care. The majority of studies have been significantly limited in sample size, number of variables, or research design. Certainly no previous studies are as comprehensive as the National Day Care Home Study. None, for example, has included a representative sample of family day care consumers varying in ethnicity and utilizing homes of varying regulatory status. None has examined in detail what parents want from their arrangements, and how they feel about family day care.

The research most useful to the development of the parent component proved to be:

- Studies of family day care arrangements as a social system, studies of user and provider attitudes, and studies of the family day care home as a childrearing environment;
- Surveys of child care arrangements of working mothers.

2.1.1 Research on Family Day Care as a Social System and a Childrearing Environment

A series of studies conducted by Arthur Emlen and Associates (1971, 1974) in Portland, Oregon, examined family day care as a natural system, contracted privately and informally between users and providers living in the same general locality. A longitudinal study of 116 family day care arrangements (Emlen, Donoghue, and Clarkson, 1974) investigated the life circumstances and attitudes of both mothers and caregivers, characteristics of the arrangements, sources of satisfaction and dissatisfaction, and those factors contributing to stability or instability of the arrangements. Most of the relationships were mutually satisfactory, in spite of some evidence that the caregivers' accommodations to changes in the mothers' schedules and to other demands were made at some personal cost. Although caregivers were more likely to be dissatisfied, most arrangements were terminated by the mothers for reasons other than dissatisfaction: changes in marital status, residence, or job requirements. Initial impressions obtained from taped interviews indicated that both parent and caregiver wanted the other to be equally concerned about the child. Both wanted to communicate easily about the child's progress, and both had a desire to be treated fairly. "Mothers want to feel some degree of control over their child's day care situation, and sitters want mothers to live up to the contract and not take their sitters for granted" (Emlen, Donoghue, and Clarkson, 1974, pp. 102-103).

Emlen's earlier work, Child Care by Kith, was based on a preliminary study conducted to pretest and refine the development of scales used in the longitudinal research. This study viewed the arrangements primarily through the eyes of the mothers and providers and described the economic and social exchange of the contracting parties. The study made two unique contributions. One was that long-lasting relationships were well represented in the sample. The median duration of these arrangements was six months at the start of data collection. Subsequent follow-up showed that more than half of the arrangements lasted more than a year. Secondly, the sample allowed comparison of the dynamics of arrangements between "strangers" who had not known each other previously with those of arrangements between friends or acquaintances. The studies of Emlen and Associates were enormously helpful in forming our initial conceptions of the caregiving arrangement, and in focusing our attention on important variable domains for exploration.

An intensive study of unsupervised family day care arrangements in New York City (Willner, 1969) examined the caregiving characteristics of 242 providers and 360 natural mothers. The users were asked about their reasons for selecting family day care, their childrearing practices, their employment history, and their child's day care history. Willner found that private family day care users preferred center care, but this sample was taken from center waiting lists.

2.1.2 Surveys of Family Day Care Users

The question of who uses family day care is a matter of some debate to which descriptive data from the National Day Care Home Study will bring significant clarification. In 1975, the National Child Care Consumer Study was completed. This study was designed to find out who uses child care nationally, when care is used, what care costs, and, in addition, child care users' preferences, attitudes, and opinions. The more than 4000 personal interviews that were conducted from a stratified national probability sample of telephone households with children under 14 years of age proved useful in identifying broad patterns and trends. Important areas of inquiry from that survey were included in the parent component of the National Day Care Home Study. Comparison of findings with those of the National Child Care Consumer Survey are provided in this report where appropriate.

In 1970, a study was undertaken for the Office of Economic Opportunity by Westinghouse/Westat. Data were collected from a national sample of several groups of users and providers of child care services. A significant limitation of the study was that, despite the large numbers of day care centers, parents, and other interested parties it surveyed, its random sample of just 134 family day care homes was too small to provide useful generalizations, given the variety of home types. Only a limited range of data was collected by means of a telephone survey. Moreover, the samples of users and caregivers were not coordinated, precluding combined analyses of the composite data sets.

One of the earliest studies of family day care was the Spindler and Low study of 1968. This study provided information on the characteristics of a particular group of child care users--mothers who worked at least part-time for 27 weeks during 1964 and had at least one child under 14 years of age in their homes. This study and that of Ruderman in 1968 investigated mothers' satisfaction with their current day care arrangements. Results indicated that mothers with low income, particularly those using family day care, expressed the greatest dissatisfaction. Socio-economic status (SES) was seen to be related to the mothers' day care preferences. Low SES mothers preferred centers, focusing on the importance of trained staff for educating their children and for imparting social skills. Higher SES mothers, on the other hand, were more negative about centers, emphasizing their overcrowding, lack of individual care, and excessive structure. In another study, Schultze (1972) reported that Black families tended to prefer center-based care over family day care. A more recent review of studies on patterns of day care usage states that there is little difference in use patterns among ethnic groups (Hill, 1977).

2.2 Perspectives on Family Day Care

Despite the studies just cited, and despite the fact that nearly 50% of all children in full-time care are served in day care homes, the complexity and diversity of family day care arrangements have not been appreciated. Because of the emphasis on center-based care, it would not have been difficult to give credence to the stereotype that family day care is custodial, unstable, and adult rather than child-centered. After all, providers, though they may be experienced, are not "professional" as compared with day care center staff. It was essential that the National Day Care Home Study reflect both the strengths and limitations of family day care fully and impartially. The study contractors, therefore, under the leadership of ACYF, attempted to ensure a comprehensive, balanced approach in several ways:

- o Intercorporate meetings among the study contractors emphasized careful and coherent development, focusing upon both preliminary conceptualization of design and and refinement of procedures.

- The Phase I survey provided valuable baseline data necessary to the development of the overall study design.
- The consultant panel, established during Phase I, contributed extensively to the conceptualizations and design of the study and to an understanding of family day care. Consultants represented a range of specialties--research, advocacy, administration, planning, and practice. The panel included Black, White, and Hispanic persons to ensure sensitivity to the concerns of different populations using family day care.

The overall study design and the conceptualizations of the parent component reflect the major themes of CSPD's review of family day care research.

First, family day care consists predominantly of informal, private social contracts between parents and caregivers. Most do not involve a social agency or an organized child care referral service. Parents and caregivers, the contracting parties, negotiate an exchange of money for services to the child and family. The caregiving relationship is at once a business arrangement and an informal arrangement which may involve friendship or kinship. Frequently, when mothers and caregivers are not acquainted initially, the relationship develops over time into friendship. Emlen found that "high initial closeness is associated with short durations (of the arrangement) while an increasing and subsequent closeness is an important contributor to an enduring arrangement" (Emlen, Donoghue, and Clarkson, 1974, p. 252).

Second, consumers view the day care home as a child rearing environment supplementing the child's own family. Therefore, to guide the identification of domains for exploration, the contractor conducted an extensive review of relevant social science literature. As indicated in the bibliography presented in the Appendix, there have been numerous studies on the family, minority families, child socialization, the impact of working wives, and parenting, all of which proved relevant subject areas. This literature provided a rich background for the task of assessing parents' expectations for their children and their perceptions of the home as a caregiving environment.

Finally, evaluations by the parents themselves of the basic characteristics of the day care home constitute the most universally acceptable way of judging whether the home is fulfilling their expectations. Using the parents' own evaluations permits the homes to be assessed on the bases for which they were originally selected. Parents' opinions about caregiver qualifications, their perceptions of which characteristics of the home can be appropriately regulated, and their requirements regarding such characteristics as age mix, group size, and program costs provide an important context within which to consider the role of government in support of family day care.

For example, the outcome for the child in care depends on the relationship between the parent and caregiver. While the government can mandate training for providers, just which personality traits reflect concern and the capability to nurture must finally remain a judgment that parents themselves must make. Decentralized community-based resources would greatly enhance the ability of consumers to find caregivers of their preference. Serious consideration of the NDCHS parent data by policy makers will encourage the development of intervention programs that reflect the interests of both consumers and providers.

2.3 Conceptual Framework for the Parent Component

Study contractors conceptualized a model of family day care reflecting the major factors which influence this kind of care. The model identified the data collection systems necessary for a comprehensive understanding of family day care (Table 2.1).* The principal factors that influence the day care home are the characteristics of the caregiver and the consumers--parents and their children in care. The state and local regulatory environment, the sponsoring agency, and the community also affect family day care. The model provided a guide for the development of research questions and the selection of variables directed toward a detailed exploration of each of the principal factors.

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* Tables are presented at the conclusion of each chapter.

From the model, CSPD constructed a parent component designed to address the following specific research questions:

- What are the characteristics of the population that uses family day care?
- What are the child care needs and preferences of families with small children?
- What services do parents need above and beyond basic day care? What do parents expect of their arrangements and are their expectations met?
- What do parents pay for family day care? Are parents satisfied with their services in relation to cost?
- What characteristics of family day care homes and providers of care are most important to parents?

Table 2.1 demonstrates that the conceptualization of the parent study proceeded from the demand questions toward the final degree of specificity represented by the specific interview items. The major parent study constructs formed a basis for the selection of variables.

2.3.1 Consumer Population Characteristics

A basic assumption is that the family is essentially a neighborhood phenomenon influenced by community values which parents and caregivers frequently share. Child rearing attitudes, which may determine day care preferences and ultimately expectations and satisfaction, are rooted in a cultural and ethnic heritage. This is but one index of how important parent and child demographic data are to an understanding of many issues in the study. However, such SES variables as income, education, and occupation, when linked to ethnicity, have been used with caution in the interpretation of findings. As Hill notes,

> Many of the studies in the literature fail to note the broad range of values and lifestyles among persons within similar socioeconomic levels, and the great similarity of values between persons at different socioeconomic levels. (Hill, 1972, p. 27.)

2.3.2 Parental Need and Preference for Child Care

The advantages of family day care are often cited in the literature. Less understood are the reasons that motivate families to select that form of care and the particular caregiver. Parents may have to balance their own family requirements, their children's needs, and the availability of the care they want.

In this regard, items in the parent interview were directed to the following questions of interest:

- Why do consumers select family day care? What alternatives do they consider and reject? Is there a relationship between previous child care arrangements and the choice of family day care?
- What qualifications of providers affect consumer choices?

- Is family day care the preferred care? If not, what type of care do parents want for their children?
- Is care by relatives or close friends prominent? Is such care related to ethnicity, special services, or cost?
- Is the choice of care related to special needs?
- How do parents go about finding caregivers and how do they assess caregiver qualifications?

A study of the data generated by these concerns may go far toward arriving at solutions to the social isolation of caregivers and consumers of family day care noted by Emlen:

> Perhaps the critical deficiency in family day care is the social isolation of the parties to the arrangement, the chancy way they must find one another, and the lack of social networks or supportive mechanisms connecting caregivers and users of family day care to needed assistance. The desperate working mother who doesn't know where to turn or how to do it and makes a poor arrangement that doesn't last, the housebound caregiver who struggles alone and becomes frustrated and emotionally drained--these are individuals often acting alone without assistance, guidance or support. (Emlen, 1977, p. 14.)

2.3.3 Parental Expectations and Satisfaction With Care

Parent satisfaction is a prime measure of the success of any child care program. Yet it is difficult at best to measure, particularly in an exploratory, descriptive research study. Traditionally in social research, conceptual groundwork is developed through extensive empirical studies. The aim is to generate concepts, to identify principal aspects of a new subject area, and to organize formal thinking and analysis. But family day care research is relatively recent. Therefore, in the absence of prior exploration, the assessment of parent satisfaction was approached with particular care.

Research supports the view that overall satisfaction with child care goes beyond the child's experience in care to a set of parental attitudes. Many factors individually and collectively influence parents' attitudes, including how they may feel about the necessity of making day care arrangements in the first place, how they view working mothers, and how satisfied generally they are with their own job. Idiosyncratic parental attitudes toward childrearing as well as culturally derived and specifically sanctioned attitudes toward the appropriate wife/mother role are important considerations.

For example, attitudes toward the caregiver and satisfaction with the day care arrangements may be affected by the wife's attitude toward employment. Harrell and Ridley (1975) reported that satisfaction with day care arrangements was positively related to how the mother felt about work and the job. In a recent review of research studies of women in the labor market, Beckett (1976) reported that Black married females and White married females differed in labor force participation on every variable that was investigated. The average White wife whose husband is employed may be concerned about her husband's attitude toward her employment and the effect that her absence from her children may have on them, as the average Black wife may be. For White wives, however, the traditional American view has been that, for women with preschool children, the woman's place is in the home, while the more modern or liberated view coincides with the view of most Black families. Black women are expected to combine roles of wife, mother earner worker (Scanzoni, 1975). Whereas the White wife may feel ambivalent in her "new" role as employed mother with children in day care, the Black wife's ambivalence may arise from performing the traditional role for Black women--a role that reflects 100 years of repression. These Black wives have adopted the view of women that requires mothers of infants and preschool children to remain at home (Beckett, 1976). If a wife/mother is ambivalent about working and placing her child in day care, or if her husband, family, or friends criticize her for doing so, she may project her guilt feelings onto the caregiver. She may be more critical and dissatisfied with the care her child receives, not because of inadequacies in the day care arrangement or disappointment with the caregiver, but because no child care could be satisfactory, short of her own care in her own home.

On the other hand, if she views as appropriate the placement of her child in a day care facility while she works, then her task is reduced to finding satisfactory child care arrangements and she will more probably be satisfied with child care.

While the parent component could not explore the subtleties of parent expectations and satisfaction, a number of other factors provide an index to the success of family day care as seen through the eyes of the parents. For example, family day care is attractive to many consumers because caregivers frequently provide special services beyond basic care. Parents may require flexible hours and such special services as care for ill children, transportation, overnight care, and weekend care. The data include responses to questions about parents' need for, use of, and satisfaction with any special services provided. Parents' satisfaction and dissatisfaction were also assessed by exploring the extent to which the physical facility, the program of activities, and the caregiver herself met their expectations.

The parent/caregiver relationship--the fit between the needs of the working family, the needs of the caregiver, and the needs of the child--must be a major index of the success of the arrangement. Considerable attention was given to exploring the nature of parents' communications and contact with their caregivers, the perceptions each has of the quality of the relationship, and the concern of each for the child. It was also important to assess the extent to which parents and caregivers share basic childrearing attitudes, and whether it is important to parents that they do. Caregivers often share and can reinforce the social and cultural values of the families they serve. Many parents, on the other hand, prefer to expose their children to different social experiences. Because Black and Hispanic families are characterized by extended family networks, they may more readily accept differences in their caregiver's approach to childrearing. To explore these and related factors, parents and caregivers in San Antonio and Philadelphia were interviewed extensively on their childrearing attitudes and practices.

Indirect approaches to parent satisfaction proved to be useful in isolating dissatisfaction with selected characteristics of the arrangement. For example, parents in Philadelphia and San Antonio were queried about their current expectations, the incidence of accidents in the home, evidence of distress in their children, and their initial concerns about the home prior to finalizing the arrangement.

In summary, the exploration of parent expectations and satisfaction attempts to find out what family day care, as an extension of the child's own family, means to the families involved.

2.3.4 Cost of Child Care

Mothers enter the labor force for a variety of reasons, of which the most compelling is economic. In fatherless families, the mother's income is essential to sustain the family. For many day care consumers, then, as the data reported from this study indicate, the cost of care is a factor in the selection of family day care over other types of care.

The transaction between parents and caregivers is at once an economic exchange of money for services rendered as well as an interpersonal exchange of great complexity. The parent and caregiver components of the National Day Care Home

Study explored both dimensions of the caregiving arrangement. Emlen's earlier findings provided a context and direction for selected aspects of the cost of care. He reported that caregivers frequently mentioned government subsidies as an alternative to asking mothers to pay higher fees.

> Many a sitter during the interview stopped when she came to the item about being paid enough and explained to the interviewer that she knows from her own experience when she was a working mother how little a mother has in take-home pay after taxes, social security, transportation, clothing expenses and baby-sitting fees. Sitters are particularly solicitous of mothers who are "going it alone" and some will reduce fees based on ability to pay. (Emlen, Donoghue, and Clarkson, 1974, p. 101.)

Caregivers are in somewhat of a bind. They can select the children they want to serve but cannot price themselves out of the market by charging fees commensurate with services. Most parents in Emlen's study paid the "going rate" even if they could afford to pay more.

These earlier findings suggested to the contractors that both caregiver and parent interviews should explore interactions regarding fees--that is, who establishes the fee and how parents and caregivers feel about changing the fee schedule as circumstances change. Additionally, parent respondents were queried concerning their ability and willingness to pay more for the same services and for additional services.

2.3.5 Family Day Care Home Characteristics of Importance to Parents

The initial years of childhood, so heavily influenced by the experience of the family day care home, are considered by many experts in child development to be of major importance because of their impact on character formation. Cast in this light, it is easy to perceive that the family day care home, an institution of growing centrality in the evolution of American society, may have major impact on the very nature of society itself. For this reason, it is important, even at this early stage of studies of family day care, to attempt to identify emerging central themes in the nature of this experience, and to describe those characteristics of the arrangement which are most important to parents.

This effort to focus on what is central in the family day care experience for parents is not representative of the variation in that experience, nor should it be. Rather, it is a purposive attempt to call attention to dimensions of the experience that, in the ebb and flow of American social development, may be used to characterize it. What is presented in the summary chapter, therefore, should not be taken as the only characteristics of encounters by parents with these aspects of social organization.

The rich data base, consisting of responses by parents themselves, provides an invaluable opportunity to attempt to answer the question, "What do parents want in a family day care arrangement for themselves and for their children in care?"

Parents need day care to remain in the labor force. They need to fulfill their work obligations without a feeling of anxiety about the welfare of their children. Once parents find a caregiver who meets requirements of pay, hours, and location, what other aspects of care become most important to them? Our approach to this question involved examining patterns and themes in answers to selected key questions in the interview instrument.

The capacity of the caregiver to meet the needs of parents and children, and the qualities she brings to this task, emerge as a central area of concern. The parent study instrument was designed to obtain parents' perceptions of their caregivers by means of direct and indirect questioning throughout the interview. For example, parents responded to the direct question,

> "Why did you choose your caregiver instead of someone else?"

Near the end of the interview, parents were asked if they had ever recommended their caregiver, and if they would recommend their caregiver. Both questions were followed by probes to determine reasons.

The parent and the caregiver share a common concern--the child in care--and both need continuing evidence from the other that this concern exists. The parent interview determined parents' perception of the quality of the caregiver/child relationship, the quality of the caregiver's supervision, and specifically those things parents perceive that their children are getting out of family day care arrangement. At the conclusion of the interview, parents responded to two important open-ended questions for which verbatim answers were recorded:

> "What is most important to you as a parent who uses family day care?"

"What do you want in day care for your child?"

The National Day Care Home Study was not designed to evaluate the effects of family day care on children; rather we have approached this important form of care through those who use it and those who provide it. In the final analysis, family day care thrives because parents and caregivers achieve an accommodation that meets their own requirements and the needs of the children in care.

2.4 Major NDCHS Design Variables

A key research issue influencing the study design was whether differences in services provided, in caregiver and child behaviors, and in parents' perceptions of care were related to differences in the regulatory status of the home. To permit exploration of this issue, all major forms of family day care homes were included--sponsored, regulated, and unregulated.

Since it was assumed that child care attitudes and practices are to a large extent determined by ethnic and cultural values, the study design had to allow for the identification and measurement of differences in family day care attributable to the community and ethnic groups. Therefore, the three major ethnic groups both providing and using family day care services are represented in the study--White, Black, and Hispanic. The classification of homes by ethnicity and by regulatory status formed the basis of the study design (Table 2.2).

The three study sites--Los Angeles, San Antonio, and Philadelphia--are characterized by distinct environmental, socio-economic, and cultural patterns. This allowed an assessment of the influence of such factors upon the provision of care and upon parents' expectations of their care arrangements. Table 2.3 presents the parent study sample design.

There is yet another concern that received special analysis: the identification of similarities and differences between those parent families using care by relatives and those not using relative care. Relative care may emerge as having significantly different characteristics because of the parent/caregiver relationship. The National Child Care Consumer Survey reported that in Hispanic households using substantial levels of care, there is a decided trend in favor of relative care. This form of care is largely unregulated. The data were examined to explore, for example, the provision of special services, the level of fees, and differences in frequency and content of parent/caregiver communication.

2.5 Instrument Development

2.5.1 Pre-Test of the Pilot Study Instrument (Phase II)

Table 2.1 shows that both Phase II and Phase III instruments were directed to the same parent constructs. There were, however, several important differences. The pilot study experience in Los Angeles provided an opportunity to finalize the research design, refine procedures, and revise instruments.

During the development of the instrument to be used in Los Angeles, items were pre-tested in Greater Hartford, Connecticut. Families there reflected the study population both in ethnicity and in the regulatory status of homes used. The pre-test was conducted in three phases, each of which was followed by instrument revisions. The objectives of the pre-test were:

- to determine if respondents understood the questions
- to identify questions which were sensitive or value-laden
- to develop response categories
- to eliminate questions which elicited minimal data
- to determine the most natural sequence of items
- to assess time requirements

Videotapes of selected interviews allowed observation of interviewer behavior and respondent reactions, and proved useful for training parent interviewers in Los Angeles.

2.5.2 Instrument Revisions - Philadelphia and San Antonio (Phase III)

Many items in the Phase II instrument were intentionally left open-ended to avoid placing preconceived constraints on respondents. In contrast, the revised Phase III instrument contained fewer open-ended questions; these were items on which it was crucial to obtain substantive responses. Interviewers were thoroughly trained to probe. For example, respondents were asked this important question: "Why would you recommend your caregiver?" If the respondent

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answered "Because she provides good care," the interviewer probed for the parent's idea of "good care."

In Los Angeles, parents responded to selected items in a skip pattern. Not all items on parent/caregiver childrearing ideas were presented to every respondent. Half the sample, randomly selected, responded to each item set. This procedure allowed exploration of alternative means of examining these constructs. The Phase III instrument, however, was significantly refined; contractors developed a childrearing attitude scale which was administered to all parents and providers. Congruent items in both parent and caregiver instruments explored the frequency and content of communication.

Table 2.1 indicates that in Phase III items were added to provide more specific data on parents' expectations, evaluations, and satisfaction with specific aspects of the family day care home and program. These revisions permitted coordinated analyses of the same variables to be explored throughout the parent, caregiver, and observation systems.

2.5.3 Termination Interview Instrument

It was expected that a few family day care arrangements would terminate during the course of the data collection efforts. Contractors developed a termination interview for parents and caregivers to determine reasons, from both perspectives, for ending the caregiving arrangement. However, none of the parents in the sample terminated.

2.5.4 Research Design Issues

Additional and important issues were considered in the design of the parent study which could not be explored. Study contractors recognized the complexity of family day care, and spent considerable time assessing many alternative design options.

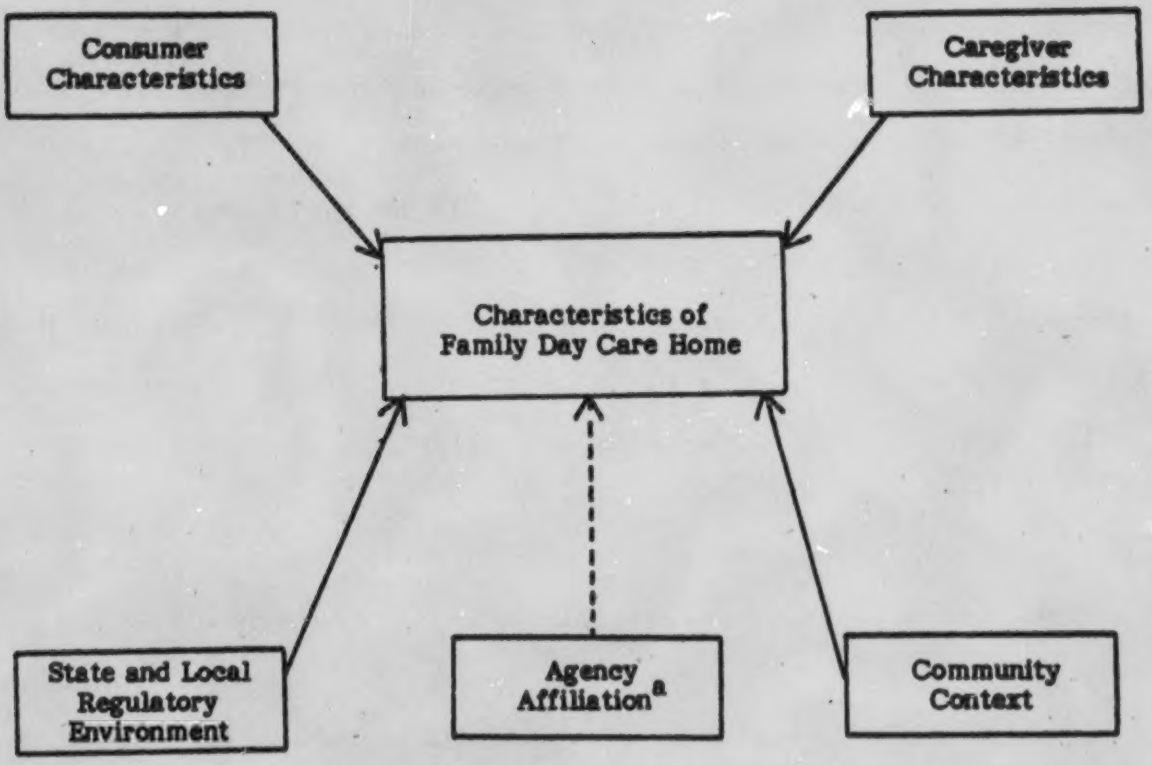
For example, the contractors and consultant panelists were sensitive to the fact that studies of the family have focused on the mother as the parent having primary child-rearing responsibilities. Criticism of this focus on the attitudes, values, and behaviors of mothers has been growing, along with a concomitant interest in the involvement of fathers in childrearing and care. (See Lein, 1974; Peters, 1976; and Lynn, 1969.) The inclusion of a sample of fathers in the parent component was a major design issue. It became apparent, however, that to obtain a representative sample of fathers the sample of parent respondents necessary would have to have been increased to a size that was impractical, given time and budgetary contraints and the complexity of the study.

The findings of the National Child Care Consumer Survey and our own perceptions of family day care as well supported the need to explore the direct relationship between patterns of child care arrangements and of parental job history. The first draft instrument developed and pre-tested included an assessment of this relationship. From each pre-test family a longitudinal profile was obtained, relating job history to patterns of care. The instrument, however, had to be modified to its present form, because obtaining this information required an amount of time disproportionate to other areas of inquiry. Respondents had too many things to think about: for example, each child (where there were siblings); job history; multiple arrangements; types of care; reasons for termination.

It seemed likely, moreover, that family structure, family support networks, and the isolation of the nuclear family would be related to parental expectations of the caregiver and the nature of the "social contract," that is, to communication, control, and stability. It appeared important to explore how the caregiver fits into the parent family network--what other support does she provide? The first drafts of the instrument developed by CSPD extensively explored responsibilities for particular aspects of childrearing within the family and the community, and included the caregiver. This exploration was subsequently reduced. However, the caregiver data analyses explored caregiver isolation and community contacts.

Throughout the developmental phases of the study, it was constantly necessary to balance the complexity of factors thought to influence parents' use of and satisfaction with family day care against real world constraints--limited budgets, respondent burdens, and time. The choices required to achieve a realistic level of inquiry were always difficult and necessitated a refinement of priorities in study objectives.

Figure 2.1: MAJOR INFLUENCES ON FAMILY DAY CARE


Consumer Characteristics
Caregiver Characteristics
Characteristics of Family Day Care Home
State and Local Regulatory Environment
Agency Affiliation[a]
Community Context

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[a] The broken line connecting *agency affiliation* to *characteristics of family day care home* indicates that a given home may or may not be part of a family day care system. When a home *is* part of such a system, the services that the system provides and the requirements it makes are important determinants of the character of that home.

TABLE 2.1

Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
1.0 What are the characteristics of families using family day care?	1.1 Parent population characteristics	1.1.1 Ethnicity	Q 93	58
		1.1.2 Age	Q 94MO, 94DAY, 94 YEAR	59a
		1.1.3 Sex	.. ..	59b
		1.1.4 Marital status	Q 27	60
		1.1.5 Employment - spouse	Q 99D, 99E, 99F	61a, 61b, 61c
		1.1.6 Hours of employment - spouse	Q 32A, 32B	61d
		1.1.7 Employment - respondent	Q 99A, 99B, 99C	64a, 56b, 64c
		1.1.8 Hours of employment - respondent	Q 30A, 31A	64d
		1.1.9 Spouse attending school	.. ..	62a, 62b
		1.1.10 Respondent attending school	.. ..	65a, 65b
		1.1.11 Education - spouse	Q 98	63
		1.1.12 Education - respondent	Q 97	66
		1.1.13 Residential mobility	Q 95A, 95B, 95C, 96	67a, 67b, 67c, 67d
		1.1.14 Household income	Q 92, 100	68, 69
		1.1.15 Household major source of income	Q 101 (large question)	70a
		1.1.16 Household additional sources of income	.. ..	70b
		1.1.17 Household composition	Q 92A, 92B, 92C	.. ..

TABLE 2.1
Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
2.0 What are the child care needs and perferences of families with small children?	2.1 Reasons for needing child care	2.1.1 Reasons for needing child care	Q 1A, 1B, 1C, 1D	2, 3
	2.2 Alternative types of care considered and sought or rejected	2.2.1 Alternative types of care considered and sought or rejected	Q 2A, 2B, 3A, 3B, 3C, 3D, 4A, 4B, 5	5a, 5b, 5c, 5d.
	2.3 Parent's child care arrangements	2.3.1 Additional child care arrangements for target child	Q 28, 29A, 29B, 29C, 29D, 29E 29G, 29H, 29I, 29J.	1, 16a, 16b, 16c, 16d, 16e, 16f, 16g, 16h, 16i
		2.3.2 Arrangements for children under age 18	Q 23, 23A, 23B, 23C, 23D, 23E, 23F	1, 16a, 16b, 16c, 16d, 16e, 16f, 16g, 16h, 16i
	2.4 Specific services needed, provided (available) and used	2.4.1 Specific service needed, provided (available) and used - all FDCHS	Q 37, 38	17a, 17b, 18 (all)
		2.4.2 Specific services needed, provided (available) and used - sponsored FDCHs	.. ..	56a, 56b, 56d
	2.5 Method of selecting child care arrangements	2.5.1 Method of selecting child care arrangements	Q 9A, 10, 11A, 11B, 14, 15, 17, 18	6a, 6b, 6c, 7, 8
	2.6 Parent motivation for selecting the particular family day care home and particular caregiver.	2.6.1 Parent motivation for FDCH selection	Q 6, 7, 8A, 8B, 8C	9a, 9c, 9d, 10a, 10b.
		2.6.2 Previous child care arrangements and reasons for termination	Q 20A, 20B, 21A, 21B, 22A, 22B	14a, 14b, 14c, 14d
		2.6.3 Bad experience in past arrangement	Q 24A, 24B	15a, 15b, 15c,
		2.6.4 Duration of current arrangement	Q 25B	13a, 13b

TABLE 2.1
Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
2.0 continued	2.7 Preference for relative care	2.7.1 Relationship to child	Q 98C	9b
		2.7.2 Advantages/disadvantages of relative care	Q 5, 81A, 81B, 81C, 82A, 82B, 82C	9c, 9d
		2.7.3 Preference for care by close friends	Q 98C	10a, 10b
	2.8 Preference for care by close friends	2.8.1 Relationship to caregiver prior to arrangement	Q 21A, 21B	10a, 10b
		2.6.1 Reasons for selecting FDCH and caregiver	Q 6, 7, 8A, 8B, 8C	9a, 9c, 9d, 10a, 10b
	2.9 Preferences for type of child care	2.9.1 Settings by age of child	Q 86, 87A, 87B, 87C, 87E	24, 71

TABLE 2.1

Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONSTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
3.0 What services do parents need above and beyond basic day care? What are parent expectations of their arrangements and are these expectations being met?	3.1 Flexibility requirements	3.1.1 Flexibility of hours	Q 30A, 30C, 31B, 31C, 51B 51C, 51D, 51E	22, 23b
		1.1.8 Work schedule	Q 30A, 31A, 32A, 32B	64b, 61d
	3.2 Special services provided by caregiver over and above basic day care?	3.2.1 Special needs of child	Q 42A, 42B, 43A, 43B	17a, 17b
		3.2.2 Parent/family needs	Q 40A, 41A	18a, 18b, 18c, 18d, 18e, 18f, 18g, 18h, 18i, 19a, 19b, 19c,
	3.3 Role of caregiver in parent/family network	3.3.1 Parent/family needs in sponsored homes	Q 37, 38	56a
		3.3.2 Role of caregiver in parent/family network	Q 84A, 84B, 84C, 85A, 85B	34a, 34b, 40a, 40b, 40c
	3.4 Parental preferences and evaluation of caregiver	3.4.1 Caregiver professionalism	.. ..	43a
		Quality of supervision	.. ..	52a, 52b, 52d, 52e, 52f
		3.4.2 Experience vs. training	.. ..	25b
		3.4.3 Caregiver reliability	Q 52A, 52B, 52C	23c, 49a, 49b, 49c, 49d, 52c, 52d
		3.4.4 Parents' recommendation of caregiver	.. ..	53a, 53b, 53c, 53d
		2.6.1 Reasons for selecting caregiver	Q 6	9a, 9c, 9d

TABLE 2.1

Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
3.0 continued	3.5 Parental preferences/evaluation of the FDCH	3.5.1 FDCH physical environment spaces temperature, light, cleanliness	.. ..	42a, 42b, 42c, 42d
		FDCH Program/activities for child		
		3.5.2 Educational activities	.. ..	25a
		3.5.3 Play activities vs. learning activities	.. ..	25d
		3.5.4 Appropriate activities for child T.V.	.. ..	43b, 43c, 43d
		3.5.5 Perception of benefits to child	.. ..	46a, 72b
		3.5.6 Perception of unmet needs	.. ..	46b
		3.5.7 Distress	.. ..	48a, 48b, 48c,
		3.5.8 Accidents	.. ..	52a, 52c, 52d, 52e, 52f
		3.5.9 Bad experience	Q 24A	51a, 51b, 51c
		3.5.10 Nutrition	.. ..	28a, 28b, 28c, 28d, 28e, 28f,
		3.5.11 Age mix	Q 88	44b
		3.5.12 Group size	.. ..	45a, 45b, 22
	3.6 Parent priorities for child	3.6 Parent expectation for child	Q 75, 76, 77, 102B	46a, 46b, 51a, 51b, 72b
	3.7 Characteristics of FDCHS important to parents	(Refer to variables 5.1.1 through 5.1.18)		
	3.8 Characteristics which represent main concerns	3.8.1 Location of FDCH (Refer to variables 5.1.1 through 5.1.8)	Q 33, 34A, 34B, $34C_1$, $34C_2$, $34C_3$, $34C_4$	26d, 26b, 27e, 27f

TABLE 2.1

Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
3.0 (continued)	3.8 Characteristics which represent main concerns (continued)	3.8.2 Characteristics parents did not like at the time of the arrangement	9A, 9B	12a
	3.9 Parent/caregiver relationship	3.9.1 Parent/caregiver communication	.. ..	.. ..
		3.9.2 Before arrangement	.. ..	35b, 32a, 32b,
		3.9.3 At the beginning of the arrangement	.. ..	34a, 34b, 35a, 35b, 36a, 36b,
		3.9.4 During the arrangement	Q 61A, 61b, 62, 63A, 63C, $64A_1$, $64A_2$, 65A, 65b, 65A, 65B, 65C, 66, 67 67B, 68, 69, 70	32d, 38a 38b, 38c, 39a, 39b, 40a, 40b
		3.9.5 Discipline	Q 74A, 74B, 74C, 74D	22
		3.9.6 Child-rearing attitudes	Q 71A, 72A, 72B, 73A	40, 40a, 40b, 40c, 72b, 41a 41b, 41c, 41d, 41e,
	3.10 Parent satisfaction/dissatisfaction with FDCH arrangement	3.10.1 Sponsored homes. Services needs - used, satisfaction	Q 12	56a, 56b, 56c, 56d, 57
		3.10.2 Satisfaction with services in relation with cost of care	Q 57A, 57B, 57C, 57D	31a, 31b, 31c, 31d
		3.10.3 All parents - satisfaction with services	.. ..	37a, 37b, 37c, 37d, 37e, 37f,
		3.5.10 Nutrition in FDCH	.. ..	28a, 28b, 28c, 28d, 28e, 28f, 28h, 28i
		3.10.4 Attitude toward fee in relation to services	Q 57A, 57B, 57C, 57D	31a, 31b, 31c, 31d

TABLE 2.1

Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
3.0 (continued)	3.10 Parent satisfaction/dissatisfaction with FDCH arrangement (continued)	3.10.5 Expectations not met	.. ..	37b, 37c, 37d
		3.10.6 Unexpected benefits	.. ..	37e, 37f
		3.10.7 Amount and nature of supervision	.. ..	43a, 52d, 52e, 52f
		3.5.2 Appropriateness of activities	.. ..	43b
		3.5.4 Appropriateness of TV time	.. ..	43d
		3.5.1 Appropriateness of amount of space	.. ..	43a
		3.5.1 Appropriateness of temperature	.. ..	42b
		3.5.1 Appropriateness of light	.. ..	42c
		3.5.1 Appropriateness of cleanliness	.. ..	42d
		3.5.11 Satisfaction with age mix	.. ..	44b
		3.10.8 Parent's perception of benefits to child	Q 75A1, 75A2, 76A1, 76A2, 77, 78	46a
		3.5.6 Parent's perception of child's unmet needs	.. ..	46b
		3.5.9 Bad experience in present arrangement	.. ..	51a, 51b, 51c
		3.5.8 Accident in current vs. previous FDCH	.. ..	52a, 52b, 52c
		3.10.9 Overall satisfaction/dissatisfaction - all homes	Q 12, 91A, 91B, 91C	53a, 53b, 53c, 53d, 53e, 72c

TABLE 2.1
Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES		MEASURES	
				Phase II Items	Phase III Items
3.0 (continued)	3.10 Parent satisfaction/dissatisfaction with FDCH arrangement (continued)	3.10.10	Satisfaction with special services - all homes	Q 39A, 44A, 44B, 44C, 44D, 45A, 45B, 45C1, 45C2, 46, 47, 48, 49A, 50A, 50B, 50C, (large question) 102C	18 (large question)
		3.5.10	Advantages/disadvantages of relative care	Q 5, 81A, 81B, 81C, 82A, 82B, 82C	9c, 9d
		3.5.10	Reasons for termination of current arrangement	Q 25B	13a, 13b
		3.5.10	Reasons for termination of previous arrangement	.. ..	14a, 14b, 14c, 14d
		3.5.9	Bad experience in past arrangement	Q 24A	51a, 51b, 51c
		3.1.1	Flexibility of hours	Q 30B, 30C, 31B, 31C, 51A, 51B, 51C, 51D, 51E	22, 23a
		3.9.5	Discipline	Q 74A, 74B, 74C, 74D, 74E	22, 23b
		3.5.12	Group size	.. ..	22, 45a, 45b
		3.4.3	Caregiver reliability	Q 52A, 52C, 3A, 52C3B, 52C4, 34C5, 34C6	22, 23c, 39a, 49b, 49c, 49d
		3.8.1	Location of FDCH	Q 33, 39A, 34B, 34C1, 34C2, 34C3, 34C4	26d, 26e, 27e, 27f

TABLE 2.1
Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
4.0 What do parents pay for family day care? Are parents satisfied with services in relation to cost?	4.1 Cost of care	4.1.1 Subsidization	Q 53B, 53C, 53D, 53F	29a, 29b, 29c
		4.1.2 Source of payment	Q 53A, 53B, 53D, 53E, 53F 55	29d
		4.1.3 Total paid by parent for target child in FDCH monthly	Q 53C, 53G, 53H	30a, 30b
		4.1.4 Total paid for target child (including all care arrangements) by parent weekly	.. ..	30b
		4.1.5 Total paid for all other children in household (regular child care)	.. ..	30c, 30d, 30e
	4.2 Satisfaction with fee in relation to service	4.2.1 Attitude toward fee in relation to services	Q 57A, 57B, 57C, 57D	31a, 31b, 31c, 31d
		4.2.2 Difficulty paying on time (and resolution)	Q 56A, 56B, 56C	33a, 33b
		4.2.3 Time of payment	Q 54	.. ..

TABLE 2.1
Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
5.0 What characteristics of FDCHs and providers of care are most important to parents?	5.1 Parental attitudes on regulation of FDCHs, and what should be regulated	5.1.1 Parental knowledge of regulatory status of home	Q 58	20
		5.1.2 Parental opinion re: regulation of FDCHs in general	Q 59A	.. ..
		(Parental opinion on regulation of:)		
		5.1.3 Number of children	Q 59D	21b
		5.1.4 Caregiver's experience	Q 59D	21b
		5.1.5 Caregiver's education	Q 59D	21b
		5.1.6 Caregiver's training	Q 59D	21b
		5.1.7 Caregiver's personality	Q 59D	21b
		5.1.8 Caregiver's health	Q 59D	21b
		5.1.9 Safety of FDCH	Q 59D	21b
		5.1.10 Caregiver's age	Q 59D	21b
		5.1.11 Age mix	Q 59D	21b
		5.1.12 Children's health	Q 59D	21b
		5.1.13 Nutrition	.. ..	21b
		5.1.14 Program/Activities	.. ..	21b
		5.1.15 Play equipment	.. ..	21b
		5.1.16 Cost of care	.. ..	21b
		5.1.17 Space in home	.. ..	21b
		5.1.18 Outside space	.. ..	21b

TABLE 2.1

Demand Questions, Constructs, Variables, Measures

DEMAND QUESTIONS	PARENT STUDY CONTRUCTS	VARIABLES	MEASURES	
			Phase II Items	Phase III Items
5.0 (continued)	5.2 Characteristics of FDCHs important to parents	(Refer to variables 5.1.1 through 5.1.18 above)	.. ..	.. ..
	5.3 Characteristics which represent main concerns	(Refer to variables 5.1.1 through 5.1.18 above)	.. ..	.. ..
	5.4 Characteristics which should be regulated	(Refer to variables 5.1.1 through 5.1.18 above)	.. ..	.. ..
	5.5 Parental preferences policy issues	2.9.1 Day care settings for children 1 - 5 years of age	Q 87A, 87B, 87C, 87D, 87E	24
		3.5.11 Age mix	Q 88	44a, 44b, 25c
		3.5.11 Group size	.. ..	45a, 45b, 22

Table 2.2

National Day Care Home Study Design

Caregiver and Parent Ethnicity	Regulatory Status Sponsored	 Regulated	 Unregulated
White	Sponsored White	Regulated White	Unregulated White
Black	Sponsored Black	Regulated Black	Unregulated Black
Hispanic	Sponsored Hispanic	Regulated Hispanic	Unregulated Hispanic

Table 2.3
National Day Care Home Study Design

Site I - Los Angeles - Phase II Site

	Sponsored Homes	Regulated Homes	Unregulated Homes
White	16	16	16
Black	16	16	16
Hispanic	16	16	16

TOTAL = 144 Homes

Site II - San Antonio - Phase III Site

	Sponsored Homes	Regulated Homes	Unregulated Homes
White	-	16	16
Black	8	16	16
Hispanic	8	16	16

TOTAL = 112 Homes

Site III - Philadelphia - Phase III Site

	Sponsored Homes	Regulated Homes	Unregulated Homes
White	16	16	16
Black	16	16	16

TOTAL = 96 Homes

NOTE: Hispanic caregivers were not sampled in Philadelphia because the number is relatively small nationally. A representative sample was obtained in Los Angeles and San Antonio. At the time of the study there were no White sponsored homes in San Antonio.

Chapter 3.0

PARENT STUDY METHODOLOGY

3.1 Parent Sample Selection

Sampling procedures for the National Day Care Home Study were developed and implemented by the staff of Abt Associates, Inc. In the three sites a total of 793 caregivers were located utilizing a quasi-random method. Five hundred and one (501) of these caregivers were subsequently selected to comprise the main caregiver study, again according to a quasi-random procedure designed to assure an adequate number of respondents in all study design cells. These procedures are more fully described in National Day Care Home Study Vol. VII, The Field Operations Report. A sample of 367 parents was selected from parents of children in the 501 caregiver family day care homes. These respondents were selected to meet the stratification requirements of the study design.

Parents eligible for selection also met the following criteria:

- Their children in the day care home ranged in age from infancy to 60 months.
- The care had to be paid for by some source, whether by parents, a subsidizing agency, or some combination of the two.
- Parents had to express a willingness in writing to participate in the study.

Of the 367 parents selected, 19 ultimately declined to participate or terminated the interview before completion, leaving an effective sample of 348 respondents in the three sites. Table 3.1 compares the actual and proposed parent sample distributions in the study design cells. Though not constructed on a probability basis, the sample allowed an adequate representation of major parent groups. For example, approximately 36% of all parents of children in family day care homes were single parents, and 39% of the study sample were single. (See Table 4.2.) The sample included parents with children of various ages, and both single and multiple child families. There was, additionally, a representative socioeconomic mix.[1]

A total of 243 parents using family day care were interviewed in Philadelphia and San Antonio, the two Phase III sites, exceeding study goals by 35 interviews. Table 3.2 shows the distribution by ethnicity and regulatory status; Table 3.3 describes the parent sample by ethnicity and site. Although the ethnicity design variable provided three categories, a number of persons interviewed did not classify themselves as Black, White, or Hispanic. Whenever ethnicity enters into the analyses, therefore, the "n" for these analyses is lowered.

3.2 Generalizability of the Sample

The construction of a probability sample requires a precise conceptualization of the nature of the population under study, with a known, if not equal probability for the selection of each element of the population into the sample. To the extent that these requirements are met, one can "generalize" from features of the sample to features of the population under study. Any generalizations can only be made within limits imposed by the absolute size of the sample, which influences the sampling error. The representativeness of parent study data must be viewed within the context of site, caregiver, and parent sample selection.

Three study sites were considered the minimum necessary to balance the need for generalizable information with that for a detailed and comprehensive understanding of family day care. Statistical power analyses indicated, however, that nine study sites--far more than study resources could bear--would be required for a significant increase in generalizability of findings beyond that possible with three sites. The three carefully selected sites were chosen from more than 250 standard metropolitan statistical areas (SMSA's) clustered into 26 groups by factor analysis of city characteristics. Each family day care home in the study population of U.S. urban family day care homes did not have an equal or known probability of selection into the sample. For purposes of comparability, however, the study sites and specific communities had a sufficient number of sponsored, regulated, and unregulated homes, as well as Black, White, and Hispanic homes serving children of various ages. In addition, the selection of sites was heavily dependent on the total range of variation represented by communities in combination. For example, it was necessary to have both geographic dispersion and a variety of regulatory approaches represented in the study sites. Likewise, sites were selected to maximize the possibility of achieving adequate sample sizes in all design cells. For this reason, each site had a large total amount of family day care, and a sufficient pool of families eligible for subsidized care.

Within the constraint imposed by the necessary limitation to three study sites, a theoretical possibility existed for constructing each of the site samples to support generalization to the three populations of family day care homes in Los Angeles, Philadelphia, and San Antonio. In the case of the sponsored and regulated homes, those who developed the study sample were able to use what were believed to be reasonably accurate, comprehensive lists of all sponsored or regulated homes. Where cell size was sufficient, random sampling was employed within each cell. Otherwise, every kth home was selected. This technique permits cautious generalization to the populations of regulated and sponsored homes in each of the study sites.

Unregulated homes were selected for the study by canvassing selected neighborhoods, by talking to community leaders, and through other site development efforts discussed below in Section 3.2.1. This generated a bias in the sample, if we assume that the population of caregivers operating unregulated homes is heterogeneous on the variables of interest to the study. Though the theoretical potential for generalizability could not, therefore, be realized to the same extent as for sponsored and regulated homes, substantial information on unregulated family day care providers was obtained.

Parent respondents eligible for participation were selected on the basis of their willingness to do so, and only a fraction of possible parents gave their assent. As a result, bias is generated in this sample, as with the caregiver sample, if we assume the parent population is heterogeneous on the variables of interest in the study.

In summation, sampling errors were introduced in the construction of the parent sample at each of the three stages of sample development: the selection of study sites, the selection of caregivers within those sites, and the selection of parents employing those caregivers. In such a multi-staged cluster sampling procedure, the effects of sampling error are multiplicative, not simply additive. It is suggested, therefore, that the generalizations which can be supported from the parent data are limited.

The reader must bear in mind, however, that the National Day Care Home Study was an exploratory effort to describe the ecology of family day care as a complex social system. It is the only study of national scope to systematically observe the care of children in home environments using sophisticated and carefully tested instruments. It is a first attempt to describe the similarities and differences between sponsored, regulated, and unregulated homes, and to understand the cultural diversity in family day care among the three ethnic groups that together constitute the largest users. The data provide a broad base of information with utility for the improvement of family day care and for increased assistance to caregivers, children, parents, and program administrators.

3.3 Data Collection

The data collection effort was undertaken in several stages, here called "Phases." In Phase I, a national, 25 city telephone survey of family day care providers was conducted to obtain preliminary profiles to guide design considerations. The parent instrument, described previously, was also constructed and pre-tested in the first phase. This instrument was administered to parents in Phase II--the pilot study effort--in Los Angeles, California, from January through March 1978. Phase II concluded with the analysis of data and the revision of data collection instruments and field management procedures. Phase III was implemented in Philadelphia, Pennsylvania, and San Antonio, Texas, from October 1978 through January 1979. A phased implementation strategy proved highly cost effective, since it minimized the risk in mounting a complex and difficult field effort while simultaneously insuring increased efficiency in subsequent field experiences. As a result of the successful pilot experience, only minor modifications were required in the data collection instruments and procedures; hence a full three-site data base was available for analysis.

3.3.1 Site Development

An extensive public relations campaign launched the effort to obtain support for the study and to identify unregulated care in each community. Brochures familiarized caregivers with study objectives, explained what participation in the study would involve, and requested help in locating other family day care homes. Letters from licensing and registration officials accompanied the brochures, helping to promote the study's legitimacy.

Hundreds of posters explaining the study and asking for help in locating caregivers were hung in locations likely to catch the eye of local residents, especially parents with young children. In Philadelphia and San Antonio the media were also used to disseminate information and to gain support for the study. Media coverage was excellent in these two sites; it included TV spots, radio and television interviews, and newspaper articles.

To facilitate the identification of unregulated care, field staff with an extensive knowledge of target areas were recruited. It was expected that study staff from "down the block" who knew community leaders and were familiar with local agencies would dispel mistrust on the part of caregivers, especially those operating unregulated homes.

This "neighborhood" approach worked well in Philadelphia and San Antonio but was considerably less successful in Los Angeles. It had been assumed that Los Angeles, like most large American cities, was divided into small geographic areas with identifiable socioeconomic and cultural characteristics--neighborhoods with which residents identify or have strong ties. Initial staff experiences belied these expectations. It became evident that it would be extremely difficult to identify neighborhood leaders with any knowledge of the informal day care services operating in their communities. This absence of traditional neighborhoods required a less systematic and more time-consuming approach to the identification of unregulated care in this site.

3.3.2 Interviewer Training

CSPD field staff selected interviewers for the parent component using accepted personnel assessment and selection guidelines. These interviewers were required to undergo at least 40 hours of training prior to conducting interviews with parents. Training also included a series of practice interviews, followed by in-depth debriefing sessions.

In addition, CSPD was responsible for the development and implementation of a core training package designed to sensitize all contractor staff and field interviewers to the complexities of family day care, and particularly to the cultural differences to which they would be exposed. This training was important in minimizing interviewer biases in all data collection procedures.

In addition to their initial training, interviewers participated in regularly scheduled debriefings designed to resolve problems and to ensure consistency. This practice enhanced the reliability of the parent data collection effort.

3.3.3 Interviewing

Interviewing for the parent component proceeded smoothly once the responding parents had been identified. As is common with such large-scale exploratory studies, some problems in administering the data collection efforts arose, most notably in coordinating the three components of this extensive undertaking. Since most parents using family day care work during the day, interviews typically had to be conducted during the early evening hours or on weekends. Timing was not always opportune. Parents frequently showed signs of weariness after a full day's work, or expressed concern about getting dinner on the table late. A few interviews were somewhat rushed. It is not surprising that the task of scheduling parent interviews was frequently complex and arduous. Interview permission forms distributed by caregivers to all their parents were not always completed adequately. It was often difficult to contact parents who had agreed to be interviewed. In some cases, parents gave caregivers verbal rather than written permission. This permission was communicated to the site office, but often without a home and/or business telephone number or without the name and address of the parent. In such instances it was necessary to telephone the relevant caregivers for this information.

As soon as complete parent information had been obtained, interviewers were assigned to schedule appointments using available telephone numbers. Where possible, the ethnicity of the interviewer was matched with that of the parent. In a number of cases CSPD staff found it necessary to make several calls to reach a parent, and occasionally interviewers were required to visit homes in order to schedule interviews. Though parents had received brochures describing the study and had signed a parent permission form, many wanted additional information about overall study goals or about various details before agreeing to be interviewed.

Other scheduling difficulties and parent refusals posed problems. Appointments could not be arranged or were postponed repeatedly for over half (53%) of the 19 parents in the sample who were not interviewed. Eight of these (42%) refused to be interviewed, even though they consented to their child's participation in the observation studies, indicating that they did not have the time for a one-hour session. In all eight cases, no other parent could be chosen from the same family day care home for the parent interview. In the remaining cases the interviews were interrupted; despite repeated attempts to arrange a second appointment, the interviews could not be completed.

Interviewers were instructed to schedule appointments with the parent having primary responsibility for maintaining the child care arrangement. In the majority of two-parent families, the mother was interviewed in the absence of the father. However, in a number of homes both parents chose to be present. In most of these situations the presence of both parents facilitated the interview process. The father either tended to the children while the mother responded to questions, or actively participated in the interview and gave his views about day care arrangements. On some occasions the participation of the father revealed apparent disagreements between the parents about child-rearing practices and such other aspects of family life as the level of family income.

Most parents who were interviewed indicated that they welcomed the opportunity to discuss their day care arrangements. Many commented that they had never thought about some of the topics covered in the interview. During periodic debriefing sessions, CSPD staff generally observed that parents seemed candid in their responses to interview questions, though in some instances they required repeated reassurance that their comments would be held in confidence and would not be revealed to caregivers.

3.3.4 Documents Control

As interviews were conducted, a system of coding the completed documents was employed to insure confidentiality of data and maintain respondent anonymity, as well as to assure that proper recording and safe storage would preserve valuable data from any erosion through loss of administrative control.

This system consisted of encoding each completed parent instrument with a number, part of which was unique to it and part of which would identify it with the corresponding instruments used in the caregiver study and in the observational analysis.

3.4 Data Analysis

Data analysis began with editing the questionnaires and ended with the data analysis carried out as the final report was being prepared. As this was an exploratory inquiry, every effort was made to generate as clean a data base as possible within the constraints of the sample design and resource limitations. The data were subjected to cross-tabulation analysis as the basic analytical technique.

3.4.1 Editing, Coding, Keypunching

The questionnaires were edited, the open-ended items post-coded, and the data converted to machine-readable format as the first procedures in the analysis of the data. The questionnaires were first edited and cleaned to assure that subsequent work on the data would be based on precise readings of what data had been recorded on each of the documents. All ambiguous responses were clarified, and most of the open-ended responses were copied onto consolidated sheets so that they could be compared and subjected to further qualitative analysis, if necessary. The editing was performed simultaneously with the coding of the open-ended responses. A specially assembled

CSPD team carried out these tasks. The working group was comprised of university graduates and university students under the direct leadership of a quality control supervisor and under the general supervision of the CSPD principal investigator and project director. The team was trained for a full working day to assure consistency in these editing and coding tasks.

When these data preparation tasks were completed, the questionnaires were shipped from the CSPD offices in Washington, D.C., to Abt Associates headquarters in Cambridge, Massachusetts, where the data were converted to machine readable format.

3.4.2 Separation of Phase II and Phase III Analyses

Because the instruments used in the distinct data collection efforts of Phase II (Los Angeles) and Phase III (Philadelphia and San Antonio) were somewhat different, as mentioned in Chapter 2.0 above, it was necessary to separate most of the analysis in accordance with these two sub-sets. That is, data collected in Los Angeles were most often analyzed separately from data collected in San Antonio and Philadelphia. In the special cases where the items were closely matched in the two instruments, it was possible to combine the analysis. Furthermore, it was possible to recode the response categories in some of the items so that the data from the two Phases could be combined in this way as well. Thus, in Chapters 4.0 through 7.0, where findings of the study are reported, tables present data for the total sample or for each of the two study Phases. In most cases Los Angeles data are reported separately from those obtained in Philadelphia and San Antonio (Phase III).

3.4.3. Data Analysis Techniques

The data analysis reported in the remaining chapters of this document was performed by CSPD on the digital computer at Abt Associates, Inc., using the Statistical Package for the Social Sciences (SPSS) routines. (A computer terminal at the CSPD offices in Washington was connected by telephone to the Abt computer.) As most of the data were discrete, rather than continuous, almost all of the analysis consisted of frequency distributions and cross-tabulations. In that the exact relationship between the parent study sample and the population of parents in the United States using family day care homes is unclear, it was not deemed appropriate to apply the devices and logic of inferential statistics to this data set.

A factor analysis was run on the data elicited by a version of Kohler's Maternal Attitude Scale included in the Phase III instrument.[2] However, these results and the results of discriminant function analyses performed on some of the study variables are not reported in any detail because of the potential for overinterpretation.

3.5 Summary

The sample for the parent study, generated by Abt Associates, was based on the caregiver sample. Of the 367 parents who initially agreed to be interviewed, 19 refused or terminated the interview before completion, leaving a total of 348 usable responses, distributed by study site, ethnicity, and regulatory status (see Tables 3.1, 3.2, and 3.3).

The implementation of the study design was an arduous, exciting, and rewarding undertaking. All tasks, from constructing the sample design to performing the data analysis, presented many challenges. These were confronted in all instances in a way that sought to retain the integrity of the design and of the study as it unfolded through creative and responsible improvisation in the field. The result is a rich and enormously informative body of data on parental experiences and attitudes toward the family day care home, the modal setting in which young children are cared for outside the home in contemporary American society.

CHAPTER NOTES

1. A small substudy of within-home variability was originally contemplated to provide information on variation in parental experiences in the same home. In anticipation of this, two different families were selected and interviewed in each of 17 family day care homes--13 in Philadelphia and 4 in San Antonio. However, data collection requirements and project resources would not permit this to go forward.

2. This part of the instrument met the interval level data requirements of Pearson's r, the fundamental computation of factor analytic work, without "forcing" the data in an application of the techniques associated with "dummy variables." The results of factor analysis are almost always indeterminate and subject to many, often conflicting interpretations. For this reason, the reporting of these results is very limited to discourage overinterpretation. For the same reason, an associated discriminate function analysis was not reported at all.

Table 3.1: NATIONAL DAY CARE HOME STUDY

PARENT SAMPLE[1]

Site I - Los Angeles
Phase II Site

	Sponsored Homes	Regulated Homes	Unregulated Homes
White	12/16	15/16	14/16
Black	11/16	11/16	7/16
Hispanic	12/16	12/16	11/16

TOTAL = 105/144 Homes

Site II - San Antonio
Phase III Site

	Sponsored Homes	Regulated Homes	Unregulated Homes
White	[2]	25/16	24/16
Black	5/8	5/16	17/16
Hispanic	10/8	20/16	16/16

TOTAL = 122/112 Homes[3]

Site III - Philadelphia
Phase III Sites

	Sponsored Homes	Regulated Homes	Unregulated Homes
White	24/16	14/16	18/16
Black	28/16	24/16	13/16

TOTAL = 121/96 Homes[3]

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[1] The numbers above the "/" indicate the actual sample size, while those below the "/" were the sample objective. For example, the objective in Philadelphia for non-Hispanic White parents in regulated homes was 16; 14 were actually interviewed and are part of the study sample.

[2] There are no non-Hispanic White-sponsored homes in San Antonio.

[3] In Philadelphia and San Antonio, the actual sample obtained exceeded the objectives.

Table 3.2: RESPONDENTS IN PARENT SURVEY BY ETHNICITY AND TYPE OF FAMILY DAY CARE HOME

ETHNICITY	REGULATORY STATUS			
	Sponsored	Regulated	Unregulated	TOTAL
White	36 (25%) (35%)	54 (37%) (43%)	56 (38%) (47%)	146 (42%)
Black	44 (37%) (43%)	40 (33%) (32%)	37 (30%) (31%)	121 (35%)
Hispanic	22 (27%) (22%)	32 (40%) (25%)	27 (33%) (22%)	81 (23%)
TOTAL	102 (29%)	126 (36%)	120 (35%)	348 (100%)

Table 3.3: RESPONDENTS IN PARENT SURVEY BY ETHNICITY AND SITE

ETHNICITY	SITE			
	Los Angeles	Philadelphia	San Antonio	TOTAL
White	41	56	49	146
Black	29	65	27	121
Hispanic	35	--	46	81
TOTAL BY SITE	105	121	122	348

Chapter 4.0

CHARACTERISTICS OF THE PARENT STUDY SAMPLE

4.1 Introduction

One of the basic questions addressed by the National Day Care Home Study was, "Who are the consumers of family day care?" This chapter provides descriptions of the families who were selected for the parent survey. Based on the reports of the responding parents, it characterizes the families according to standard demographic factors and according to the study design variables of ethnicity, site, and regulatory status. When relevant data are available, this chapter attempts to compare the consumer families to the national population and to the population of their respective cities.

The demographic questions included in the parent survey were designed to elicit responses concerning several types of information at a general level. These questions follow:

- o What types of families use family day care?
- o How do these families differ from the population at large?
- o What demographic factors are associated with the choice of a family day care home of one particular regulatory status as opposed to another type?

- How is the type of family day care home chosen related to ethnicity, income, education, and other demographic variables?

The data reported in this chapter apply variously to the responding parent (usually the mother), the spouse, the focus child, or the family in general. The variables reported include (1) respondents' age, sex, and marital status; (2) numbers of children in respondent families and the ages of the focus children in care; (3) total annual family income and income sources; (4) educational attainment of the respondents; (5) occupations of the respondents and the spouses; and (6) residential stability, as indicated by time of continuous residence in the same city, the same neighborhood, and the same house. Data regarding these characteristics are differentiated according to the study design variables of (1) ethnicity (White, Black, or Hispanic)*; (2) family day care home regulatory status (sponsored, regulated, or unregulated); and (3) study phase and site (Phase II--Los Angeles, Phase III--Philadelphia and San Antonio, or the total sample). Disaggregation of data from the two phases was sometimes necessary because of differences between the questions on the two data collection instruments.

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*/ Because of other or undisclosed ethnicities, the total study sample is larger than the sum of the numbers in these three ethnic groups.

The statistics reported are principally raw frequencies and percent frequencies of responses in particular categories, based on one or more of the characteristics enumerated above.[*] Medians are reported when they are meaningful and statistically appropriate, but most of the data are presented as marginal distributions or cross-tabulations.

Where comparative statistics are presented, they are based on the U.S. Census Bureau's Current Population Survey for the reference year 1977 or on other Census surveys, as indicated. An attempt has been made to obtain comparative data which are as relevant as possible to the findings under consideration. SMSA or city data, data based on different ethnic groups, and other disaggregated estimates have been reported whenever reliable sources have been found.

4.2 General Description

4.2.1 Age, Sex, and Marital Status of Respondents

Most (60%) of the parents who were interviewed were between the ages of 25 and 35; the median age of the group was 30. About 30% were between 20 and 25 and 10% were over 35. Little difference in respondents' ages was observed across the ethnic groups. Only two parents in the sample of 348 were under 20. Although teenage and young adult parents were not purposely excluded from the sample, they are not represented. A number of factors tend to prevent young parents from needing, using, or paying for child care. These factors include the high rate of unemployment among persons in this age group, particularly for minority groups, which leaves them available to care for the children themselves, as well as reducing the funds these parents have to spend on child care. In addition, teen-aged mothers, who are often unmarried, frequently live in an extended family arrangement, which provides a source of in-home care.

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[*] In the tables, the percentages in parentheses are based on the total numbers of cases in the rows (when placed to the right of the raw frequencies) and the columns (when placed below the raw frequencies).

The vast majority (94%) of the responding parents were women, but 19 of the respondents were men. Data collected from the 19 fathers in the study did not differ significantly from those obtained from the mothers in most respects. For that reason, there will be no further differentiation by respondent sex in this report. It is interesting to note, however, that 13 of the fathers were married, all were employed, and ten had attended some college. Three had less than a high school education. Six of the eight men in Los Angeles reported having had no previous relationship with the caregivers, while six of the 11 fathers interviewed in Philadelphia and San Antonio indicated that they had known the caregivers before the arrangement had begun. Four of these fathers reported a prior relationship of at least a year's duration. The 19 fathers were about evenly distributed in the use of sponsored, regulated, and unregulated day care homes.

Census studies have shown a steady increase over the past two decades in the percentage of single-parent families (13% increase in 1970 and 16% in 1977, for instance). A parallel rise has been reported in the number of families headed by single (divorced, widowed, separated, or never married) mothers (10% increase in 1960, 11% in 1970, and 13% in 1977). In the present sample, 39% of the respondents were single, while 61% were married or informally married. Table 4.1 represents the detailed breakdown of the sample by marital status.

Table 4.2 presents the frequencies of families using the three types of family day care homes by marital status and ethnicity. The data in this table show that single parents were more often users of sponsored family day care homes than married parents. Among the 100 users of sponsored homes, 59 were single; only 39 single users would be expected on the basis of the proportion of the sample who are single. Single-parent families were more than twice as likely to use a sponsored home as married parents (45% vs. 20%), and almost three times as likely if they were also Black (54% vs. 19%). Of the families of single respondents using sponsored care, the majority were Black (51%). Among the 56 single Black parents, 16% used regulated homes, 30% used unregulated homes, and the remaining 54% used sponsored homes. By contrast, only 33% of the single White parents sent their children to a sponsored day care home. The overall use of the sponsored homes among married parents was 20%, while 45% of the single parents had their children in a sponsored home. The concentration of single parents among the users of sponsored care is not surprising because the incomes of single-parent families are generally less than those of two-parent families, and sponsored care is frequently subsidized. The NDCHS data revealed that 85% to 90% of the slots in sponsored homes received some form of state or federal subsidy (Vol. V, AAI, 1980).

4.2.2 Number of Children in Respondent Families and Ages of Children in Care

Table 4.3 presents the distribution of family size in the sample of users of family day care homes and for the national population as determined in 1977 by the Census Bureau. On the average, the families in the study sample had fewer children than those in the national census sample. While 28% of families nationally had more than two children under the age of 18, only 18% of the families in the study had more than two. Only 7% of the respondents had more than three children. The median numbers of children per family were 1.64 for the parent sample and 1.87 for the National Census sample. There was little variation in the number of children per family across ethnic groups and regulatory status.

The median age of the focus children in care was approximately two years and nine months. The distribution of ages is presented in Table 4.4. The table shows that 68%

of the children were under three years of age. This observation is consistent with the findings of earlier studies showing that parents tend to choose family day care homes for children under three and center-based care for children as they approach the age of five.

There were no major variations from the two-year, nine-month median age by ethnicity or regulatory status. However, there was a variation between the sites studied in the two phases. In Philadelphia and San Antonio, the sample was somewhat more heavily weighted toward older children than in Los Angeles. The median in the former two cities was approximately three years.

4.3 Economic, Educational, Occupational, and Residential Characteristics

4.3.1 Family Income

The annual family income of the parent sample ranged from less than $6,000 to more than $26,000 a year. The median family income in the sample, as presented in Table 4.5, was approximately $12,653. The median U.S. family income, as estimated by the Bureau of the Census for 1977, was $16,009. This is a difference of about 20%. The overall sample median income is not particularly meaningful in view of differences observed among users of different types of family day care homes and among different ethnic groups.

The distribution of annual family income for families using the three types of day care homes are presented in Table 4.6. The median income of families using sponsored homes was $8,736, as compared to $14,849 and $14,371 for those using regulated and unregulated homes, respectively. In general, the median income of families using sponsored homes was more than 40% below that of the families using non-sponsored homes. Examination of the distributions presented in Table 4.6 reveals a concentration of lower-income families in the sponsored group that is not present in the other two groups. To look at the data from a different perspective, 52% of the families with incomes of $9,000 or less used a sponsored home as compared to 24% of the families with incomes of $12,000 or more. At the upper end of the income range, only 8% of the families using a sponsored family day care home reported incomes over $21,000, while almost 26% of the users of the other two types of homes had incomes in that range.

The median income of White families was highest ($14,617) and that of Black families was lowest ($10,656). Data relevant to this analysis are presented in Table 4.7. Hispanic families had a median income a little less than halfway between that of White and Black families ($12,000). Income of $9,000 or under was reported by 21% of the White families, 40% of the Black families, and 36% of the Hispanic families. The percentage of White parents reporting family incomes over $12,000 (30%) was approximately twice that of Black parents (15%) and three times that of Hispanic parents (9%).

The simultaneous disaggregation of family income by ethnicity and regulatory status revealed one exception to the White-Hispanic-Black income ranking. Among the users of regulated day care homes, the median incomes of Black and White families were approximately equal; both were between $15,000 and $18,000. White families with higher incomes were most likely to choose an unregulated home, while higher-income Black families tended to choose a regulated home.

Table 4.8 presents a comparison between family incomes of the parent sample and family incomes of the general populations sampled by the Census Bureau. For the purpose of this comparison, the incomes of families in the present sample are represented by ranges of values which contain the actual median value. Some of the interesting details reflected in Table 4.8 are the following:

- According to Census estimates, the median family income of all U.S. two-parent families was $17,616 while the median for families headed by single females was $7,765. The median income of the single parents in the present sample, which is in the $6,000 to $9,000 category, is consistent with the national median.
- The White parents in the study showed a median income substantially below the national median of $16,740 for White families. The incomes of the Black and Hispanic parents in the present sample were somewhat above the incomes of these groups in the national Census sample, which showed medians of

$9,563 and $11,421, respectively. This difference is illustrated best by the medians presented in Table 4.7.

- Two-parent Black families in the sample reported incomes with a median of $13,716. The incomes of Black and Hispanic single parents in the sample had medians above the national estimates.
- Aggregation across racial and ethnic groups reveals that the incomes of respondents in Los Angeles were below the median family incomes for that city, and those in Philadelphia were significantly below the SMSA median for that city.

4.3.2 Source of Family Income

Almost 90% of the families in the sample reported that earnings from employment were their major source of income. The distribution of income source by ethnicity is presented in Table 4.9. AFDC, WIN, or other welfare programs were identified as the major source of family income of 5% of the respondents, and 6% identified other sources such as child support, alimony, unemployment compensation, or student loans as the primary source. Fifteen of the 17 families on some form of welfare were Black and two were Hispanic.

Of the 17 families who listed welfare as their major income source, ten were using sponsored homes, four unregulated homes, and three regulated homes. Among the 21 families reporting major income sources other than employment earnings or welfare, nine were using unregulated homes, eight sponsored homes, and four regulated homes.

4.3.3. Educational Attainment

The frequency distributions of educational attainment for the sample of responding parents and for a Census sample of adults between 25 and 34 are presented in Table 4.10. These distributions are disaggregated by ethnicity and by regulatory status. About 51% of the responding parents had at least some college education, as compared with 44% of the national sample, but the percentage that had completed college or taken post-graduate work was less than that in the national sample (17 versus 24). The frequencies of individuals who had not completed high school were roughly equal to those in the Census sample. This suggests that the sample contains greater than the expected number of college drop-outs or individuals with Associate of Arts degrees.

When the sample is disaggregated by ethnicity, the percentages of respondents who have at least some college education is 56 for Whites, 53 for Blacks, and 38 for Hispanics. Black and White respondents differed in the percentage who had completed college or done post-graduate work, with 36% of the White respondents and 13% of the Black respondents in this category. The educational level reported by the responding Hispanic parents was generally lower than that of Black or

White parents, with 30%, 11%, and 9%, respectively, reporting less than a high school diploma.

There was little systematic relationship between use of one type of family day care home or another and educational level, but there was a slight tendency for the users of regulated homes to report higher levels of education than the users of the other types of family day care homes. Education does not predict the choice of one type of home or another.

4.3.4 Parents' Occupations

The parents in the sample were employed in a wide variety of occupations, with the range of occupations of their spouses generally greater than that of the respondents themselves. Problems with the set of occupational categories used in the instrument for Los Angeles necessitated a revision, and the categories for the instrument used in Philadelphia and San Antonio were selected to conform with those used by the Bureau of Labor Statistics in reporting aggregated occupational data. As a result, data from the respective phases cannot be compared directly without aggregation into rather global categories.

The parents participating in the study in Los Angeles were grouped in the following five categories:

- Upper level professional and managerial employees (e.g., physicians, lawyers, university professors, bankers, and executives)

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- Lower level professional and managerial employees (e.g., nurses, teachers, social workers, supervisors, and foremen)
- Skilled tradespersons and laborers (e.g., secretaries, plumbers, tool and dye makers, and other technicians)
- Service and unskilled tradespersons and laborers (e.g., sales clerks, file clerks, factory workers, and construction workers)
- Students

Professional and managerial positions accounted for 32% of the respondents' jobs and 40% of the spouses' jobs, as shown in Table 4.11. Twenty-five percent of respondents and a like percentage of spouses held lower level professional or managerial positions. Twenty-nine percent of respondents and 33% of spouses held positions in skilled trades, labor, the arts, or sales. Among the respondents (women, for the most part), the modal position type was service and unskilled trades, with 37%, while only 27% of the spouses' jobs fell into this category. Although the data presented in the table are not disaggregated by ethnicity, supplementary analyses show that the high frequency of service and unskilled labor jobs among the respondents is attributable to the Black and Hispanic respondents.

In the instrument used in Philadelphia and San Antonio, 15 occupational categories were offered but only 12 of them were actually represented among the responses of the parents. These were:

- Professional
- Manager
- Clerical worker
- Salesperson
- Craftsman
- Equipment operator
- Transportation worker
- Laborer
- Service worker
- Household worker
- Volunteer
- Other

As shown in Table 4.12, 29% of the respondents worked at professional or managerial positions while 48% classified their job as clerical. Nine percent were service workers; 6% were in sales; and the remaining 8% were spread over a variety of categories. Among the spouses, those holding professional and managerial positions accounted for 37% of the sample; 22% were laborers; clerical and service workers represented 10% each; and those working in transportation and sales represented 7% and 6%, respectively. The positions of the spouses were more diverse than those of the respondents, as in Los Angeles.

In Table 4.13, the occupational categories were reaggregated so that the data from Los Angeles could be compared with the data from Philadelphia and San Antonio and overall statistics could be developed. Twice the proportion of respondents from Philadelphia and San Antonio had positions in skilled trades, labor, arts, and sales as had respondents in Los Angeles (58% versus 29%), and the proportion of service and unskilled labor positions in Philadelphia and San Antonio was about a third of that in Los Angeles (13% versus 37%). Among the spouses, however, no such significant difference appeared.

4.3.5 Residence Type and Residential Stability/Mobility

About half of the families in the sample rented their homes. White families tended to own their homes more frequently than families in other ethnic categories. Only 23 (7%) of the families contacted lived in public housing, and, of these, only one lived in Los Angeles.

Residential stability is a family and parental characteristic which may be related to the duration of a family day care arrangement and to other aspects of care. The distribution of the number of years respondents had lived in the same home, the same neighborhood, and the same city are presented in Table 4.14. As might be expected, the respondents had lived in the same city for a longer period of time than they had lived in their neighborhood, and, similarly, they tended to have lived in the same neighborhood for longer than they had lived in their home. Overall, the median duration of residence in the same home was two years and eight months, but the median time in the neighborhood was four years and one month. Over 50% of the respondents had lived in the same city for over 15 years.

The approximate median number of years respondents had lived in the same home, for combinations of ethnicity and regulatory status by study phase, is presented in Table 4.15. The statistics in this table show that there is an overall tendency for the Los Angeles sample to have lived in the same home longer than the respondents in Philadelphia and San Antonio had. There seem to be no direct effects of ethnicity on residential stability defined in this way, but there is a slight tendency for users of nonsponsored (regulated or unregulated) care to have higher residential stability.

4.4 Summary

Based on the responses of parents to demographic questions on the survey instrument, we can draw the following conclusions regarding the sample of families using family day care homes:

- Although a majority of the families included both parents, the proportion of single-parent families in the sample was more than double that of the American population. Almost half of the Black families included only one parent.
- Single parents were twice as likely to use a sponsored home as married parents and almost three times as likely if they were Black.

- The number of children in the sample families was somewhat less, on the average, than the number in the "typical" American family. Fewer than one sample family in five included more than two children. This difference may reflect a tendency for mothers with more children to stay at home and care for them, rather than be employed.
- The majority of the responding parents were between 25 and 35 years old, and most of the children in family day care were under three. This finding is consistent with earlier reports that parents tend to choose family day care for younger children and center-based care for older preschoolers.
- Over the whole sample, the median family income was $12,653, which is 20% below the median for all American families. Substantial differences were found between the incomes of families in the three ethnic groups, with Whites highest, followed by Hispanics and Blacks.
- When the incomes of the respective ethnic groups in the sample are compared to the national statistics for those groups, the sample of Whites is found to have a lower median income than the

national median, while the Black and Hispanic families' incomes closely match the national medians for their groups.

- The users of sponsored day care homes generally had lower family incomes than the users of non-sponsored (regulated or unregulated) homes.
- Among families using non-sponsored homes, there was no overall connection between family income and the choice of regulated or unregulated day care homes. Among Whites, however, higher income tended to be associated with unregulated homes, while among Blacks, higher income was associated with regulated homes.
- The vast majority of parents in the sample reported that earnings from employment were their family's major source of income. One family in twenty received primary support from a welfare program; the focus children of over half these families were in a sponsored family day care home. However, four families out of five using sponsored care reported that employment was their major income source.
- Comparisons of the educational attainment of the parents in the sample to national statistics yield mixed results. A higher percentage

of the respondents had completed high school than that reported for the national population, but a lower percentage had completed college.

- The educational attainment of Black and White parents in the sample did not differ, but both had received more education than Hispanic parents.
- Over the total sample half the respondents (mothers, usually) were employed in skilled trades, sales, or arts, and, in Philadelphia and San Antonio, half the responding parents were clerical workers. The occupations of the respondents' spouses covered the full range of categories, with professional occupations being more heavily represented than any others.
- About half of the families in the sample rented their homes. White families tended to own their homes more frequently than families in other ethnic categories.
- Only 23 (7%) of the families contacted lived in public housing, and, of these, only one lived in Los Angeles.
- More than half the parents had lived in the same city for over 15 years. Overall, the typical family had lived in the same home for almost three years.

Table 4.1: MARITAL STATUS OF RESPONDENTS

TOTAL SAMPLE

N=348

MARITAL STATUS	Frequency	Percent
Married	198	57
Divorced	45	13
Separated	42	12
Single	42	12
Informally married	14	4
Widowed	7	2
TOTAL	348	100

Table 4.2: FAMILIES USING TYPES OF FAMILY DAY CARE HOMES BY ETHNICITY AND MARITAL STATUS

TOTAL SAMPLE

N=338

MARITAL STATUS	REGULATORY STATUS	ETHNICITY			
		White	Black	Hispanic	TOTAL
Married*	Sponsored	20 (49%) (20%)	11 (27%) (19%)	10 (24%) (20%)	41 (20%)
	Regulated	38 (45%) (39%)	28 (33%) (48%)	18 (22%) (36%)	84 (41%)
	Unregulated	40 (49%) (41%)	19 (24%) (33%)	22 (27%) (44%)	81 (39%)
	TOTAL***	98 (48%) (65%)	58 (28%) (51%)	50 (24%) (68%)	206 (61%)
Single**	Sponsored	17 (29%) (33%)	30 (51%) (54%)	12 (20%) (50%)	59 (45%)
	Regulated	22 (60%) (42%)	9 (24%) (16%)	6 (16%) (25%)	37 (28%)
	Unregulated	13 (36%) (25%)	17 (47%) (30%)	6 (17%) (25%)	36 (27%)
	TOTAL***	52 (39%) (35%)	56 (43%) (49%)	24 (18%) (32%)	132 (39%)
TOTAL SAMPLE		150 (44%)	114 (34%)	74 (22%)	338

*Married or informally married
**Single, widowed, divorced, separated
***Column percentages for the "total" rows of the married and single groups are based on the totals in the Total Sample row.

Table 4.3: NUMBER OF CHILDREN IN RESPONDENT FAMILIES COMPARED TO NUMBER IN NATIONAL CENSUS SAMPLE OF FAMILIES

TOTAL SAMPLE

N = 322

NUMBER OF CHILDREN IN FAMILY*	RESPONDENT FAMILIES		NATIONAL SAMPLE PERCENTAGE*
	Frequency	Percentage	
1	145	45	37
2	119	37	35
3	35	11	17
4 or more	23	7	11
TOTAL	322	100	100
Median Number:		1.64	1.87

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*Excludes children 18 and over

** Based on Census Bureau's Current Population Survey, 1977

Table 4.4: AGES OF FOCUS CHILDREN IN FAMILY DAY CARE HOMES

TOTAL SAMPLE

N=297

AGE (Years)	CHILDREN IN AGE GROUPS	
	Frequency	Percentage
Under 1	6	2
1 to 2	77	26
2 to 3	89	30
3 to 4	56	19
4 to 6	54	18
Over 6	15	5
TOTAL	297	100

Median Age: 2 yrs., 9 mos.

Table 4.5: DISTRIBUTION OF ANNUAL FAMILY INCOME

TOTAL SAMPLE

N = 312

INCOME*	Frequency	Percent
Under $6	45	14
$6 - 9	49	16
$9 - 12	52	17
$12 - 15	46	15
$15 - 18	30	10
$18 - 21	26	8
Over $21	64	20
TOTAL	312	100
Median: $12,653		

* Income stated in thousands

Table 4.6: ANNUAL FAMILY INCOME BY REGULATORY STATUS
TOTAL SAMPLE

N = 312

ANNUAL INCOME*	REGULATORY STATUS			
	Sponsored	Regulated	Unregulated	TOTAL
Under $6	25 (56%) (27%)	9 (20%) (8%)	11 (24%) (10%)	45 (14%)
$6 - 9	23 (47%) (24%)	14 (29%) (12%)	12 (24%) (11%)	49 (16%)
$9 - 12	22 (42%) (24%)	14 (27%) (13%)	16 (31%) (15%)	52 (17%)
$12 - 15	7 (15%) (8%)	20 (44%) (18%)	19 (41%) (18%)	46 (15%)
$15 - 18	5 (17%) (5%)	14 (46%) (12%)	11 (37%) (10%)	30 (10%)
$18 - 21	3 (12%) (3%)	11 (42%) (10%)	12 (46%) (11%)	26 (8%)
Over 21	7 (11%) (8%)	30 (47%) (27%)	27 (42%) (25%)	64 (20%)
TOTAL	92 (29%)	112 (36%)	108 (35%)	312
Median:	$8,736	$14,849	$14,371	$12,653

*Income stated in thousands.

Table 4.7: ANNUAL FAMILY INCOME BY ETHNICITY
TOTAL SAMPLE

N = 302

ANNUAL INCOME*	ETHNICITY			
	White	Black	Hispanic	TOTAL
Under $6	8 (18%) (6%)	25 (55%) (25%)	12 (27%) (18%)	45 (15%)
$6 - 9	20 (44%) (15%)	14 (30%) (14%)	12 (26%) (18%)	46 (15%)
$9 - 12	22 (44%) (16%)	19 (38%) (19%)	9 (18%) (14%)	50 (17%)
$12 - 15	21 (48%) (15%)	11 (26%) (11%)	11 (26%) (17%)	43 (14%)
$15 - 18	12 (40%) (9%)	11 (37%) (11%)	7 (23%) (10%)	30 (10%)
$18 - 21	13 (50%) (9%)	4 (15%) (4%)	9 (35%) (14%)	26 (9%)
Over $21	41 (66%) (30%)	15 (24%) (15%)	6 (10%) (9%)	62 (20%)
TOTAL	137 (45%)	99 (33%)	66 (22%)	302
Median:	$14,617	$10,656	$12,000	$12,695

*Income stated in thousands.

Table 4.8: MEDIAN ANNUAL FAMILY INCOME:

TOTAL SAMPLE vs. NATIONAL SAMPLE

N=312

CATEGORY	Census Median Income*	Parent Sample Median Income	N***
All Families*	$16,009	$12,000-15,000	302
White	16,740	12,000-15,000	137
Black	9,563	9,000-12,000	99
Hispanic	11,421	9,000-12,000	66
All Husband-Wife Families*	17,616	15,000-18,000	185
White	17,916	18,000-21,000	89
Black	13,716	15,000-18,000	51
Hispanic	13,063	12,000-15,000	45
All Female-Headed Families*	7,765	6,000-9,000	117
White	8,799	9,000-12,000	48
Black	5,598	6,000-9,000	48
Hispanic	5,454	6,000-9,000	21
Study Sites***			312
Los Angeles	15,931	12,000-15,000	100
Philadelphia	17,014	9,000-12,000	105
San Antonio	**	12,000-15,000	107

*From Bureau of the Census, Population Profile of the United States: 1978 (Washington, D.C.: U.S. Government Printing Office, 1979), current for 1977.

** Current median income estimate not available for San Antonio.

***Number of cases in the present sample on which median incomes were based. Report of median incomes includes 10 families who reported ethnicities other than Black, White, and Hispanic.

Table 4.9: PRIMARY SOURCE OF INCOME BY ETHNICITY
TOTAL SAMPLE

N = 338

PRIMARY INCOME SOURCE	ETHNICITY			
	White	Black	Hispanic	TOTAL
Employment	142 (47%) (95%)	91 (30%) (80%)	67 (22%) (90%)	300 (89%)
Welfare	0	15 (88%) (13%)	2 (12%) (3%)	17 (5%)
Other	8 (38%) (5%)	8 (38%) (7%)	5 (24%) (7%)	21 (6%)
TOTAL	150 (44%)	114 (34%)	74 (22%)	338

Table 4.10: NUMBER AND PERCENTAGE OF RESPONDENTS REPORTING LEVELS OF EDUCATIONAL ATTAINMENT BY ETHNICITY AND BY HOME REGULATORY STATUS WITH NATIONAL CENSUS COMPARATIVE DATA

TOTAL SAMPLE

N = 338, 348

SAMPLE	HIGHEST EDUCATIONAL ATTAINMENT						TOTAL
	Eight Years or less	Some High School	High Sch. or Trade Sch.	Some Coll./ Tech. Sch.	College Degree	Post-Graduate	
White	0 (0%) (0%)	13 (9%) (36%)	52 (35%) (45%)	46 (30%) (39%)	17 (11%) (63%)	22 (15%) (73%)	150 (44%)
Black	1 (1%) (9%)	11 (10%) (31%)	41 (36%) (35%)	46 (40%) (39%)	7 (6%) (26%)	8 (7%) (27%)	114 (34%)
Hispanic	10 (14%) (91%)	12 (16%) (33%)	23 (31%) (20%)	26 (35%) (22%)	3 (4%) (11%)	0 (0%) (0%)	74 (22%)
TOTAL	11 (3%)	36 (11%)	116 (34%)	118 (35%)	27 (8%)	30 (9%)	338*
Sponsored	2 (2%) (18%)	12 (12%) (33%)	39 (38%) (32%)	33 (32%) (27%)	8 (8%) (29%)	8 (8%) (27%)	102 (29%)
Regulated	4 (3%) (36%)	9 (7%) (24%)	43 (34%) (35%)	44 (35%) (37%)	13 (11%) (46%)	13 (10%) (43%)	126 (36%)
Unregulated	5 (4%) (46%)	16 (13%) (43%)	40 (33%) (33%)	43 (36%) (36%)	7 (6%) (25%)	9 (8%) (30%)	120 (35%)
TOTAL	11 (3%)	37 (11%)	122 (35%)	120 (34%)	28 (8%)	30 (9%)	348
National 25 - 34**	5%	11%	40%	20%	24% for aggregate		32,284

*Due to other ethnic groups, the number of cases in this analysis is not equal to the number of respondents for whom an educational level was reported.

**Based on Census Survey of 32,284 persons aged 25% to 34 conducted in 1977.

Table 4.11: PARENT OCCUPATIONS

LOS ANGELES

N = 100, 60

OCCUPATION	RESPONDENT		SPOUSE	
	Frequency	Percentage	Frequency	Percentage
Upper level professional/managerial	7	7	7	12
Lower level professional/managerial	25	25	15	25
Skilled trades and laborers, artists sales	29	29	20	33
Service and unskilled trades	37	37	16	27
Students	2	2	2	3
TOTAL	100	100	60	100

Table 4.12: PARENT OCCUPATIONS
PHILADELPHIA AND SAN ANTONIO

N =234, 136

OCCUPATION	RESPONDENT		SPOUSE	
	Frequency	Percentage	Frequency	Percentage
Professional	54	23	40	29
Manager	14	6	11	8
Clerical Worker	113	48	13	10
Salesperson	14	6	8	6
Craftsman	7	3	6	4
Equipment Operator	2	1	6	4
Transportation Worker	0	0	9	7
Laborer	7	3	30	22
Service Worker	21	9	13	10
Household Worker	2	1	—	—
TOTAL	234	100	136	100

Table 4.13: PARENT OCCUPATIONS BY SITE

TOTAL SAMPLE

N = 334, 196

OCCUPATIONAL CATEGORY	Los Angeles		Philadelphia and San Antonio		TOTAL	
	R*	S**	R*	S**	R*	S**
Professional/Managerial	32 (32%)	22 37%)	68 (29%)	51 (37%)	100 (30%)	73 (37%)
Skilled trades; skilled labor, artists and salespersons	29 (29%)	20 (33%)	136 (58%)	42 (31%)	165 (49%)	62 (32%)
Service and Unskilled labor and trades	37 (37%)	16 (27%)	30 (13%)	43 (32%)	67 (20%)	59 (30%)
Students	2 (2%)	2 (3%)	0 (0%)	0 (0%)	2 (1%)	2 (1%)
TOTAL	100	60	234	136	334	196

*Respondent
**Spouse

Table 4.14: RESIDENTIAL STABILITY: FREQUENCY AND PERCENT FREQUENCY DISTRIBUTION OF TIME IN HOME, IN NEIGHBORHOOD AND IN CITY

TOTAL SAMPLE

N = 348

NUMBER OF YEARS/MONTHS	IN SAME HOME		IN SAME NEIGHBORHOOD		IN SAME CITY	
	Freq.	Perc.	Freq.	Perc.	Freq.	Perc.
Less than 1	77	22	55	16	20	6
1 to 1/11	60	17	41	12	13	4
2 to 2/11	55	16	45	13	11	3
3 or 4	70	20	58	17	28	8
5 or 6	34	10	43	12	18	5
7 to 10	30	9	41	12	40	11
11 to 15	9	3	19	5	27	8
Over 15	11	3	45	13	191	55
TOTAL	346	100	347	100	348	100
Median	2 years - 8 months		4 years - 1 month		Over 15 years	

Table 4.15: RESIDENTIAL STABILITY: MEDIAN NUMBER OF YEARS IN PRESENT HOME
TOTAL SAMPLE BY ETHNICITY AND REGULATORY STATUS

N = 339

ETHNICITY	LOS ANGELES REGULATORY STATUS			TOTAL
	Sponsored	Regulated	Unregulated	
White	3.1 yrs. (12)	4.7 yrs. (15)	2.5 yrs. (14)	(41)
Black	3.1 yrs. (11)	2.3 yrs. (11)	4.0 yrs. (7)	(29)
Hispanic	1.8 yrs. (12)	4.1 yrs. (12)	2.8 yrs. (11)	(35)
TOTAL	(35)	(38)	(32)	(105)

ETHNICITY	PHILADELPHIA AND SAN ANTONIO REGULATORY STATUS			TOTAL
	Sponsored	Regulated	Unregulated	
White	1 yrs. (26)	2 yrs. (39)	2 yrs. (40)	(105)
Black	2 (28)	3 (26)	2 (29)	(83)
Hispanic	1 (11)	3 (19)	2 (16)	(46)
TOTAL	(65)	(84)	(85)	(234)
STUDY TOTAL	(100)	(122)	(117)	(339)

*Numbers in parentheses are number of cases or which medians are completed.

Chapter 5.0

PARENTAL NEEDS AND PREFERENCES FOR CARE

5.1 Introduction

Understanding the strengths and limitations of family day care, as perceived by the consumer, is important for those concerned with child care policy. Policy direction may take the form of providing information to help consumers assess their own requirements, the needs of their children, and the qualifications and services of prospective day care providers. But major factors influencing parents' child care decisions may well be beyond the purview of federal and state regulation. As Emlen concluded, "for both caregiver and the care user it [i.e., family day care] is an adaptation of family life" (Emlen, Donoghue, and LaForge, 1971, p. 169).

As such, the caregiver becomes an extension of the child's own family--a surrogate parent assisting natural parents with the task of childrearing. Thus providers and users have to achieve a subtle balance that assures successful interaction for the well-being of the child. Programs developed in support of family day care must be based on a recognition of the role of both parents and providers in the maintenance of stable child care arrangements. Heretofore, most intervention efforts have focused on caregivers. Because of the informal nature of family day care, and the fact that the parent/

caregiver relationship is central to its stability, support programs must focus on improving judgments, activities, and communication processes.

Family day care is not only a childrearing environment, but it is a business arrangement as well. The contract must meet the parent's needs for dependable care, at a reasonable cost, for the required hours and days. Parents, then, have to make very practical decisions based on their employment requirements and family situations. Consumers have to view their prospective arrangements from several perspectives. Policy-makers and those responsible for developing programs in support of family day care must also.

The data presented in Chapter 5.0 will assist in the understanding of motivation, the priorities parents establish, and the means by which parents choose their care and their providers. This chapter essentially explores four basic questions:

- Why do parents need child care in the first place?
- Why do consumers choose family day care? Is it their preference over other types of care?
- Why do parents select their particular caregivers?
- By what means do they locate and assess caregivers?

The data can inform important policy decisions. For example:

- What assistance do consumers need to locate caregivers who meet their requirements?
- What are the effects of regulating family day care? Is regulation a selection factor? Does it enhance any characteristics of the home or caregiver that represent priorities to parents?
- How do parents assess caregiver qualifications? What is of primary importance to them? How can these concerns be incorporated in special support programs?
- Given parents' preferences for forms of child care other than family day care, is it feasible for the government to develop additional day care programs, or to enhance the quality of services in family day care?

The notes following this chapter compare NDCHS data with that obtained from the 1975 National Child Care Consumer Study. The data from this latter study are available through ERIC.

5.2 Parental Need for Care

Eighty-six percent of the study sample reported that their principal reason for using child care was to remain in the labor force (Table 5.1).[1] Fewer Black parents (77%) needed child care to work than did White (94%) or Hispanic (88%) parents. Seventy-eight percent of all parents using sponsored care cited work as the reason for their child care requirement. Fewer than 10% needed child care to attend school or to participate in a training program. Other reasons included a desire "to get away from the children for a while" or "to teach my child to get along with other children." However, for parents in this sample, these reasons were clearly secondary to the need to work.

5.3 Reasons for Choosing Family Day Care

All parents participating in the study responded to open-ended questions designed to obtain their principal reasons for selecting family day care as opposed to some other kind of care. The data from Los Angeles were not merged with responses from Philadelphia and San Antonio because of refinements in code categories.

In Philadelphia and San Antonio, 95% of the parents used family day care exclusively, while 5% (13 families) used one or more other arrangements as well. Table 5.2 presents the main reasons for selecting family day care among those parents using homes exclusively. Cost (19%), special attention for the child (18%), and unavailability of center care (18%) were cited by 118 respondents (52%). Ten percent chose home family care for convenience, including three parents who were specifically concerned that day care center hours were not compatible with their work schedules. Nine percent stated that family day care was the only type of care available to them.

In Los Angeles, a sub-sample of 64 parents responded to a question that explored their reasons for selecting family day care over other available options. The data given in Table 5.3 indicate that parent-centered reasons (36%) and child-centered reasons (28%) were major factors for choosing family day care. Seventeen percent of the respondents stated that family day care was their only available choice, while 17% based their choice on characteristics of the care given.

Table 5.4 combines the responses of parents in Los Angeles with those of parents in Philadelphia and San Antonio which were readily interpreted as parent-centered, child-centered, situational (involving situations over which the parent had no control), and caregiver-centered. Fifty-eight percent of the parents stated that their own needs (31%) or those of their children (27%) determined their choice of family day care. Cost issues were critical to 17% of those parents responding. Of those who indicated child-centered reasons, 14% perceived that the family day care environment ensured special attention for the child. The situational reasons are revealing. A substantial percentage of the parents citing external reasons had no other day care choice available; 14% clearly would have preferred center care. A comparison of parent day care preferences with the day care actually used is described in Section 5.7. Nine parents apparently selected family day care because an agency or social worker referred the caregiver to them.

Of the sample responding, 7% focused on caregiver characteristics as their principal reason for selecting family day care. These reasons for selecting family day care can be interpreted as child-centered. Parents were most probably saying that "because my caregiver is a relative, or because my caregiver is experienced, my child will receive a level of care that satisfies me."

Forty-one percent of the parents reported that, at the time they were making their choices, they seriously considered other day care arrangements (Table 5.5). Of those who did consider alternative day care, nearly half (49%) were White, and 55% had at least some college education (Table 5.6). Most had seriously considered and then rejected center-based care. The most frequent reasons cited were that the child was too young for a large group of children, that center care was too expensive, or that there were no slots available. The verbatim remark of two respondents may reflect the attitudes of many parents in the sample. One parent in San Antonio said:

> It's cheaper to have someone take care of the child in their home--home care is better than a center and it's very difficult to find someone to come into home.

In Philadelphia, another parent stated:

> I feel that having someone come into my home was too expensive. Also the caregiver is only two doors away so that is very convenient. Day care centers are too large and my child would get lost and not enough attention could be given.

5.4 Influence of Work Schedule on Selection of Care

One of the characteristics of family day care that make it convenient for parents is its flexibility in response to varying work schedules. While most respondents (85%) worked standard day-time hours, a sizable minority (13%) either worked at night or had rotating or variable work schedules, suggesting a need for flexible child care arrangements (Table 5.7A).[2] Twenty-one of these 41 parents resided in Los Angeles.

Table 5.7B indicates that a greater proportion of White respondents (16%) worked evenings or variable or rotating schedules than Black (10%) or Hispanic (10%) respondents. Of the 41 parents working on unusual schedules, 17 used unregulated care (Table 5.8), 13 selected regulated care, and the remaining families (11) with unusual work schedules placed their children in sponsored day care homes.

5.5 Reasons Parents Selected the Particular Family Day Care Home

As the previous discussion suggests, parents were concerned that their family day care arrangements satisfy their own requirements as well as their expectations for their children. It becomes important, then, to attempt to understand how parents made assessments that the home would be suitable. The interview instruments were designed to approach this issue in several ways:

- Parents were asked to indicate the main reasons they chose their caregiver instead of someone else.

- The interview determined the ways in which parents found their caregiver.
- The content of parent/caregiver communication prior to finalizing the arrangement was explored to determine its significance to parents making assessments.

5.5.1 Reasons Parents Selected Their Caregivers

Table 5.9 summarizes data from 196 of 243 usable responses of parents in Philadelphia and San Antonio explaining the reasons for selecting their caregiver. Nineteen percent reported that the caregiver's personality was a major factor; 15% liked the convenient location of the day care home; 12% had received referrals from other persons (excluding agencies); and for 11% the caregiver was a relative. The remaining parents cited the caregiver's availability (8%), the caregiver's teaching skill (8%), the caregiver's experience (7%), and the caregiver's relationship to the parent as a friend or neighbor (7%). In Los Angeles, 61% of the parents based their selection on qualities of the caregiver while 22% cited such parent-centered reasons as cost, location, and flexibility (Table 5.10).

Table 5.11 presents responses from Philadelphia and San Antonio organized to depict caregiver-centered, parent-centered, situational, and child-centered reasons for selecting the caregiver. When the data from both phases are aggregated and categorized (Table 5.12), it is clear that the majority of parents in the sample (64%) considered the caregiver's characteristics among the most important factors when making a home selection. Eighteen percent considered such factors as convenient location, flexible hours, and cost. Among the other respondents, 11% chose their caregivers on the basis of a referral, and 10% made the choice because the caregiver was a relative. Seven percent of the sample responding reported that no other option had been available.

It appears that when parents were deciding appropriate day care settings, such factors as cost, convenience, and location--the parent-centered reasons--were key considerations. Once parents decided to choose family day care, the determining factor in selecting a home focused on the characteristics of the caregiver. Parents seemed concerned that their caregivers be able to meet the needs of their children, as well as their own need for, as they repeatedly phrased it, "reliable, dependable" care.[3] The parents' perception of the caregiver's dependability is treated in Chapter 6.0.

5.5.2 Information Sources for Locating Caregivers

Forty-four percent of the respondents in Los Angeles reported that they used personal sources of information to locate their current providers. Thirty percent relied on friends or neighbors, and 14% asked relatives (Table 5.13). Twenty percent sought referrals from Information and Referral Centers which operate in Los Angeles to assist consumers. Only

7% resorted to advertisements and an equal percentage were referred by a sponsoring agency. Asked how they would proceed if they had to make future arrangements, 21% reported that they would ask friends or neighbors for a referral, and fewer (6%) reported that they would rely on relatives. Approximately 17% would use Information and Referral Centers. Fourteen percent would seek referrals from sponsoring agencies. Only one respondent had sought assistance from the licensing agency, and only 5% said they would seek help there if another arrangement became necessary in the future.

The majority of parents in Los Angeles apparently recognized a need for assistance in locating suitable child care. Ninety-one percent of the parents said they would welcome assistance from a child care referral service, and 90% would use information on childrearing were it available to them.

Parents in Philadelphia and San Antonio also relied on assistance from personal sources to locate their caregivers (Table 5.14). Thirty-two percent asked friends or neighbors for referrals; 13% sought help from relatives; 6% used their relatives as caregivers; and 11% found friends or neighbors to care for their children. Fifteen percent said they drew upon advertisements and 16% said they drew upon referrals from a sponsoring agency.

When seeking future caregivers, 59% of respondents in Philadelphia and San Antonio indicated that they would draw upon a personal source. A slightly higher percentage (37%) would use referrals from friends or neighbors for new arrangements. Fewer, however, indicated they would seek referrals from relatives (10%). Those who would use advertisements for making future arrangements increased sharply to 39%. Twenty-seven percent reported that they would rely on advertisements by caregivers, up from 11%; 12% stated they would advertise themselves, up from 4%.

In summary, the majority of parents in the total sample tapped personal sources when seeking caregivers, and would do so again. A significant number of parents in Philadelphia and San Antonio, however, felt advertisements were effective, particularly advertisements from the caregivers.

5.5.3 Parent Communication With Prospective Caregivers

In Philadelphia and San Antonio, parents responded to four questions that explored the content of discussions with the caregivers before the caregiving arrangement was initiated. It was important to determine the specific information parents wanted from caregivers about themselves and the services available in the home. In addition, two questions explored information that caregivers had volunteered in their initial discussions. Table 5.15 reflects responses to the question, "Before your caregiver started taking care of your child, what kinds of things did you ask her/him about herself/himself?" Table 5.16 identifies information caregivers volunteered about themselves. Table 5.17 identifies the concerns of parents about services in response to the questions, "What kinds of things did you ask the caregiver about the family day care services he/she provides?" Finally, Table 5.18 identifies information caregivers volunteered about the services they provided.

An examination of the data from this series of four tables reveals that the fewest questions--only 222--were addressed by the parents to the caregivers about themselves. This low figure can be contrasted with the frequency of items of information caregivers volunteered about themselves (348), the frequency of questions parents asked about the services caregivers provided (509), and the frequency of items of information volunteered by caregivers about their services (726). A striking percentage of parents (36%) apparently preferred to request information about the caregiver from a social worker or agency, rather than to ask the caregiver directly (Table 5.15). Only 20% of the parents asked the potential provider about her caregiving experience, 11% inquired about childrearing philosophy, and 10% asked about family members. Caregivers, according to 32% of the parents, talked most often about their experience; 28% of caregivers mentioned family members; and 9% of caregivers talked about their childrearing philosophy to the parents. The data suggests that caregivers, as perceived by parents, volunteered information more readily than the parents requested it. Caregiving experience was more important to both than either training or education. This priority was also evident when interview items concerning parents' preferences regarding caregiver qualifications were analyzed (See Chapter 6.0, Section 6.2.4). The substantial use of personal resources to find caregivers suggests that parents who relied on friends or neighbors knew more about the potential caregivers, and therefore had few questions to ask in the initial interview.

Parents and caregivers talked most about services provided in the home, as indicated on Tables 5.17 and 5.18. Nutritional practices in the home were discussed most frequently--35% of the parents asked questions about this aspect of the care, and 53% of the caregivers volunteered information. (Parents' perceptions and satisfaction with food served to their children are discussed in Chapter 6.0). In order of priority, parents asked questions about hours of care (25%), the child's schedule (20%), cost and payment arrangement (19%), group size and age mix (18%), recreation and play activities (14%), and supervision in the home (12%). Caregivers had essentially the same priorities. However, after nutrition, they most frequently talked about recreation, play, and hours of care, as reported by 25% of the parents (Table 5.18). Regulation of the home was not apparently of fundamental importance; few caregivers mentioned this issue (5%) and fewer parents inquired about it (3%).

In summary, parents chose family day care for very practical reasons, and particularly focused on the caregiver's capabilities when they selected the particular family day care home. A substantial number of parents preferred to rely on friends, neighbors, and relatives to locate caregivers, but would have welcomed assistance from information and referral services. Parents generally assessed their prospective caregiver and assured themselves through conversations that the prospective caregiver was indeed capable of meeting the needs of their child for nutrition and appropriate play and social interaction. The data also reflects the working parents' need to find a caregiver who would be available for the required hours and days at a price they could afford.

The actual words of parents present their reasons for choosing their caregivers more eloquently than do masses of data:

> Best choice. Mrs. ___________ is more motherly; already had 5 children of her own and she was very dependable.

In the words of a parent using an unregulated home in Philadelphia:

> She was well recommended; her name came up over and over.

Finally, from the user of a regulated home in San Antonio:

> I feel Mrs. _________ provides adequate day care. Good child care in San Antonio is very limited. [She feeds children well, good safety.] (Main reason in brackets.)

5.5.4 Trade-Off Decisions in Choosing Caregiver

On what issues were parents willing to compromise, once they determined that caregivers met their basic and initial expectations? In all sites, parents responded to a question asking about aspects of the home they may not have liked at first; interviewers recorded their verbatim responses. Table 5.19 summarizes data from the Los Angeles sample. Sixty-two percent of the parents had no reservations at the time they made their arrangements. However, 5% indicated they did not like the facility, 4% said the fees were too high, and 3% indicated they didn't like the location. A total of 23 parents reported concerns that were not included in the code categories. These verbatim responses appear on Table 5.20, grouped by regulatory status of the home. The presence of pets in the caregiver's home was a concern for six respondents. The remaining responses vary. A few, however, appear to represent the presence of serious compromises, suggesting that parents may not have had available alternatives and therefore had to accept, for example, deficient supervision, questionable nutrition, and crowded households.

In Philadelphia and San Antonio, 44 of 235 respondents (19%) indicated that they had selected their current caregiver despite initial concerns. For the entire sample of 340 parents responding, 25% reported trade-off decisions in the selection of their caregivers--a significant proportion of the sample.

5.6 Previous Child Care Arrangements

Several questions explored the type of day care parents used prior to the current arrangement, the duration of the care, and the reasons for terminating it.

Of 345 respondents, 55% reported using day care for the focus child (Table 5.21). A higher proportion of parents using sponsored homes (64%) had used previous care arrangements than those using regulated (55%) or unregulated care (47%). The experience of the ethnic groups differed significantly (Table 5.22). A lower percentage of Black families (36%) had had earlier day care arrangements than had either White (59%) or Hispanic (71%) families. That previous arrangements had been used by a higher proportion of Hispanic families may be related to the instability of services and living conditions for undocumented persons.* In fact, Hispanic activists in Los Angeles stressed the need for more stable day care services.

Table 5.23 indicates that 64% of the parents reported using family day care as the last arrangement preceding the current one.[4] Twenty-three percent had used in-home care and 12% had used other arrangements. A higher proportion of Black (73%) and White families (70%) had used family day care preceding the current arrangement. Of the Hispanics reporting, 51% had used family day care before; however, 37% said their preceding arrangement had been in-home care, compared to 15% of the Black families and 18% of the White. The parents who had used family day care as their last prior arrangement were about equally represented in the three types of homes (Table 5.24).

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* In Los Angeles many Hispanics who entered the country without proper documents have difficulty obtaining employment or receiving social services.

Data on the reasons parents in Los Angeles terminated arrangements immediately preceding the current one cannot be reported with precision.* Among parents in Philadelphia and San Antonio, 26% reported terminating their last prior arrangement because the caregiver stopped operating a day care home (Table 5.25). Twenty-four percent said that their own needs changed. Forty-three percent of the respondents terminated because of dissatisfaction with various aspects of the arrangements. Twelve percent reported that the child had not received proper care, and 10% felt their caregivers had been unreliable.[5]

The duration of prior arrangements cannot be reported precisely for respondents in Philadelphia and San Antonio because of reliability and validity problems.* However, analysis suggests that, as in the case of parents in Los Angeles, the majority terminated in fewer than 6 months. Thirty-eight percent terminated previous care in fewer than three months, and another 21% in fewer than six months (Table 5.26 and 5.27).

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* The question used in Los Angeles was ambiguous, and hence did not elicit reliable data.

* Many responses could not be interpreted because the duration of previous arrangements reported was not in keeping with what we know about day care. For example, a number of respondents reported arrangements lasting more than 10 years. Because of the apparent unreliability of these responses, the validity (what the items are thought to measure) is also called sharply into question. However, thee problems seem to exist only for previous arrangements lasting more than one year, and it is still possible to suggest that most parents seemed to have terminated their previous arrangements in fewer than six months.

Emlen reported in his study on family day care stability that three-fourths of the arrangements ended for purely extrinsic reasons rather than because of dissatisfaction (Emlen, Donoghue, and Clarkson, 1974, p. 250). About half the parents in Philadelphia and San Antonio who had terminated previous arrangements reported such extrinsic reasons. The data in this study suggest that a significant number terminate because of dissatisfaction.

5.7 Preferred Type of Care

While family day care is the most extensively used form of out-of-home care, a significant question remains: "Do parents really want their children in family day care?" Would they prefer center-based care or in-home care? What types of care are perceived as appropriate for various ages of children? For example, do parents prefer different day care settings for infants, toddlers, and school-aged children? As previously discussed in Section 5.3, 11% of the parents had no other choice of care available to them, and, further, about 12% clearly chose family day care because day care centers require children to be over two years of age and toilet trained

(Table 5.4). Several questions explored the child care preferences of parents in all three sites.*

Table 5.28 presents data from Los Angeles which indicates that family day care is the preferred care setting for children two and three years old. Thirty-eight percent, however, prefer in-home care for infants younger than two years of age. The preference for more structured settings increases sharply for four and five year old children. Fifty-seven percent of the responses in the "other" category cited a preference for kindergarden.[6]

The same pattern is observable in the responses of parents in Philadelphia and San Antonio (Table 5.29). However, the refinement of the age categories in the Phase III instrument focused additional attention upon infants under one year of age and upon those between one and two years. For infants younger than a year in age, 78% of the respondents preferred in-home care, and 90% of those respondents indicated a preference for in-home care by a relative.

For one year old children, 62% of respondents in Philadelphia and San Antonio preferred in-home care and thought care by a relative was most desirable. For children two years of age, there was a preference for family day care (51%), followed by in-home care (27%) and center-based care (22%). For children between three and five years of age, the preference for more structured settings increased sharply--43% preferred structured settings for three-year-olds, 65% for four-year-olds, and 66% for five-year-olds.

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* Phase II and Phase III data cannot be aggregated because of differences in code categories for the ages of the target child.

Were parents able to choose the setting they perceived as appropriate for the age group of their own child? Parents' stated preferences were compared with the actual age of their own children, to obtain the data in Tables 5.30 (Los Angeles) and 5.31 (Philadelphia and San Antonio). There was a total of 68 parents in Los Angeles with children in care between the ages of infancy and three years (Table 5.30). As indicated, 48, or 62% of this group, were in family day care--their preference. Ten parents with children between infancy and three years of age really preferred in-home care. Four of these parents had infants, five were parents of two-year-olds and one was a parent of a three-year-old. None of the seven parents of four-year-olds wanted their children in family day care; neither did the eight parents of five-year-olds. Table 5.30 indicates that of the 83 parents in Los Angeles, 51% were successful in placing their children in the day care setting they preferred.

Of 188 parents in Philadelphia and San Antonio, 89 (48%) had their children in the setting of their choice--family day care by a relative (12%) or by a non-relative (36%) (Table 5.31). The remaining 99 parents, representing 53% of the sample, had other preferences. In-home care was the preference for 49% of the 55 parents of one year old children;

41% preferred and used family day care; about 9% would prefer to use center-based care. Of the parents of two-year-olds, 50% were users of the care of their preference. The preference for in-home care declined to 22%; however, 28% wanted center-based care. A higher percentage of parents of three- and four-year-olds (53% and 48%, respectively) had placed their children in the setting of their choice. Twenty-nine percent in each case, however, would have liked to send their children to day care centers. Only two of the four respondent parents of four-year-olds stated a preference for center care.[7]

Of 240 parents who provided usable responses, 125 parents (15 using family day care by a relative, and 110 in non-relative care) currently had their children in the care they wanted (Table 5.32). These parents represented 52% of the sample. All parents who used non-relative caregivers had the placements of their choice. Four percent of those parents preferring relative care were actually purchasing care from a non-relative. Of the 115 parents who were not in the care of their choice, most (53%) preferred center-based care for their children. Only five of these were currently in relative family day care. The preference for in-home care is also evident.

Table 5.33 shows a stronger preference for center care among Black parents than among Whites and Hispanics. The 36 Black respondents represent 61% of the total of 59 respondents preferring center-based care. In fact, of 101 parents indicating a preference for in-home care or center-based care, 47% were

Black, compared to 17% White and 14% Hispanic. It is apparent that there was a greater tendency for Black respondents (61%) to prefer other types of day care for their children than was true for either White (36%) or Hispanic (48%) families.

Black families have traditionally emphasized education for their children as a potent means of gaining social mobility and family stability. As Billingsley (1968) pointed out,

> Ask almost any Negro family head what he (or she) wishes most for his family, and the response would be "a decent house in a decent neighborhood." Ask that same parent what he wishes most for his children, and the response would be "a decent and effective education." (pp. 181-82)

More Black respondents perceived that center care best met their requirements. Ruderman (1968) also found that preferences for types of child care were highly correlated with ethnicity. In this study, 65% of Black mothers expressed a preference for center-based care as opposed to 47% of White mothers.

5.8 Parental Preference for Care by Relatives

Contrary to expectations, only 12% of the respondents in the parent sample were using relative care. However, data from the caregiver component revealed that over half the children in Black and Hispanic unregulated homes in Los Angeles and San Antonio were related to their caregivers. For both ethnic groups, the extended family represents a necessary and important support network.[8] According to Billingsley (1968), roughly a quarter of all Black families live in extended family situations. Further, Black childrearing techniques reflect an emphasis on the interconnectedness of children with other family members. As the caregiver data show, many of the relative caregivers were grandmothers who perceived themselves as simply taking care of their grandchildren.

Table 5.34 indicates that 12% of the parent sample used relative care; all but six families were in Los Angeles (32%) and San Antonio (54%). There was, for reasons not yet clear, a lack of relative care among Philadelphia's unregulated Black caregivers. As expected, most relative care was unregulated (78%) (Table 5.35A) and was used by fewer White respondents (4%) than by Blacks (16%) and Hispanics (20%) (Table 5.35B). Among relative caregivers there were 29 grandmothers and eight aunts (Tables 5.36A and 5.36B).

The median age of children in relative care did not vary appreciably when compared to non-relative care. No appreciable distinctions became apparent when the median age of the child in care was examined by ethnicity and regulatory status. Most parents in Philadelphia and San Antonio who used relative providers said they chose the caregiver because of the familial bond (Table 5.37).

Different questions were asked of Phase II respondents and Phase III respondents to obtain an idea of the advantages of relative care. Parents in Philadelphia and San Antonio responded to the following questions:

> "Are there any advantages to having a relative take care of your child?"
>
> "Are there any disadvantages to having a relative take care of your child?"

Caregiver reliability was mentioned by ten respondents; eight parents felt relative care met the child's emotional needs (Table 5.38). Parent/caregiver communication, hours of care, and the availability of special services were each cited by respondents. Only two parents said that cost was an advantage of care by a relative.[9] Seventeen parents cited additional advantages. Few parents (four) mentioned disadvantages of relative care. Three felt that parent/caregiver communication was more difficult, and one parent felt that the caregiver was too permissive with the child.

The parent respondents in Los Angeles were asked,

> "Do you think it is harder or easier to have a relative care for your child?"

Nine stated that relative care was easier, while one parent found it more difficult.

5.9 Duration of Current Arrangement

This chapter began with a discussion of the reasons parents selected family day care and their caregivers. It is appropriate to conclude with an understanding of parents' plans to continue using their current arrangements.* Seventy percent of the respondents in Los Angeles planned to continue their arrangements six months or more; 30% planned to terminate within six months. Proportionately, fewer Black respondents there planned to end their arrangements than did Whites or Hispanics (Table 5.39A). In Philadelphia and San Antonio, the majority of parents (53%) planned to keep their children with their current providers for more than one year (Table 5.40). No apparent differences emerge when regulatory status or ethnicity are considered (Table 5.41). Only 7% of the respondents would terminate because of basic dissatisfaction (Table 5.42) and none of these were in unregulated homes (Table 5.43). Of those parents who would terminate in less than a year, 29% said their children would transfer to a day care center when they became old enough (26%) or when space became available (3%).

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* Data from Phase II and Phase III could not be aggregated.

As expected, more Black parents (15) would terminate in order to send their children to centers than Whites (eight) or Hispanics (two). Twenty-four percent of the respondents said their children would be going to school, and 15% indicated they would be changing residence. More White parents gave these responses (79% and 52%, respectively) than did Blacks and Hispanics.

5.10 Summary

Eighty-six percent of the sample needed child care to remain in the labor force; about 10% required those services in order to be able to receive training or schooling.

Somewhat fewer Blacks than Whites and Hispanics needed day care in order to be able to work; among users of sponsored homes, only 78% reported needing day care for this reason.

No one reason preponderated among the several offered for the choice of family day care over some other type. Some of the reasons given were parent-centered; cost, for example, was the main reason cited by 19% of the parents in Philadelphia and San Antonio. Flexibility in response to varied work schedules was revealed as another significant parent-centered advantage of family day care. Other reasons were child-centered; 18% of parents in Philadelphia and San Antonio, for example, apparently believed that family day care would ensure their child special attention. Still other reasons were situational; for 39% of the parents in Los Angeles, no other type of day care was available.

In selecting a particular caregiver, parents more often paid greater attention to the qualities of the caregiver--the caregiver's personality or experience or relation to the parent, for example--than to any other consideration, such as cost or location. Most respondents reported using a personal source of information to locate their caregiver. Parents asked caregivers few questions about themselves, concentrating upon how the caregiver's philosophy and experience would be manifested in the day care program. Almost two-thirds of the parents selected their day care home without significant reservations about it; only a very few reported making serious compromises.

More than half of the respondents reported using a previous arrangement for their child, most of them another family day care arrangement. Forty-three percent of the respondents in Philadelphia and San Antonio who reported terminating previous arrangements had done so because they had been dissatisfied. Other reasons, however, were of considerable importance. Many terminations would result, for example, when the child in care would grow old enough to move on to a preferred type of care. Distinctly different patterns emerged when the respondents were categorized by ethnicity and by the regulatory status of the home they used.

Although all the parents in the study were users of family day care, more than half of them had not been able to place their child in the type of care they would have preferred. Family day care emerged as the preferred choice for children aged two and three. But for younger children, a sizeable number of respondents would have preferred in-home care, and for children four and five years old a majority of respondents would have preferred a more structured group setting, such as a day care center.

Only 10% of all respondents were using care by a relative, although over half the children in Black and Hispanic unregulated homes in Los Angeles and San Antonio were cared for by relatives. Such care most often arose from the nature of the family bond and reflected its qualities.

CHAPTER NOTES

1. The Unco study reported a similarly strong connection between use of family day care and employment. Among households using care ten or more hours per week, 87% of those using non-relative family day care were employed. This percentage was the highest observed among all types of care reported (Vol. II, Table 6-3).

2. For both child care schedule and parent's work schedule, Unco data revealed important differences among family day care users, depending on whether or not the caregiver was a relative. The child care schedule for users of unrelated providers was similar to that of centers and nursery schools: care tended to be full day, weekdays only, on a fixed schedule. Conversely, users of relatives had child care schedules similar to in-home users (Vol. II, Table 6-7). Unpublished tabulations showed comparable differences for the user's work schedule as well.

3. From among 31 possible selection factors, users of family day care in the Unco study indicated that finding a reliable and dependable caregiver was most important (Vol. III, Table 4-18).

4. About half of the family day care users in the Unco study had used family day care as their previous arrangement (Vol. III, Table 4-10).

5. In the Unco study, the most frequently cited reason for discontinuing previous family day care was the child becoming "too old" (Vol. III, Table 4-6). Other important reasons included parent no longer working, provider no longer available, and users moved elsewhere.

6. Respondents in the Unco study were about equally divided in their opinion as to whether "day care centers should accept infants" (Vol. III, Table 3-75). Opinions did not vary strongly according to type used, including non-users.

7. Of all users in the Unco study, 32% of unrelated family day care users and 27% of related family day care users would have preferred switching their main method of care (Vol. III, Table 3-12). Users of relatives most frequently cited a preference for nursery school or center care, while users of unrelated providers tended to prefer both group types and "own home by non-relative" as well (Vol. III, Table 3-13).

8. Unpublished tabulations of the Unco data showed that Blacks and Hispanics used relatives more frequently than did Whites. Hispanics were somewhat more likely to feel that the "main advantage" for using relatives was that they cost less (Vol. III, Table 3-46).

9. Almost half of the users in the Unco study felt that reduced cost was the main advantage for using relatives. This opinion was more strongly held by those actually using relatives than by users of non-relatives (Vol. III, Table 3-47).

Table 5.1: PERCENTAGE OF RESPONDENTS USING DAY CARE BECAUSE OF WORK

TOTAL SAMPLE

N = 348

ETHNICITY	Sponsored	Regulated	Unregulated	TOTAL
White	94% (36)	93% (54)	95% (56)	94% (146)
Black	64% (44)	80% (40)	89% (37)	77% (121)
Hispanic	87% (18)	91% (29)	89% (27)	88% (74)
TOTAL	78% (98)	88% (123)	92% (120)	86% (341)

Table 5.2: MAIN REASONS PARENTS CHOSE FAMILY DAY CARE
PHILADELPHIA AND SAN ANTONIO

N = 227

MAIN REASONS	Frequency	Percent
Not enough attention for child at a center	29	13%
Children under 2 not accepted by a center	27	12%
Financial	27	12%
Only available care was family day care	20	9%
Convenience	20	9%
Cost lower for family day care	16	7%
Parent wanted child to learn to get along with other children	12	5%
Other	11	5%
Child gets special attention in a home	12	5%
Family day care home provides good care	11	5%
Parent referred to caregiver	9	4%
Social worker/agency chose family day care	8	3%
Parent liked particular caregiver	8	3%
Center facilities were deficient	6	3%
No openings in center	5	2%
Parent never considered in-home care	3	1%
Children must be toilet trained to attend a center	2	1%
Center hours do not match work hours	3	1%
TOTAL	227	100%

Table 5.3: MAIN REASONS FOR SELECTION OF FAMILY DAY CARE FROM AVAILABLE OPTIONS

LOS ANGELES

N = 64

REASON	Frequency	Percent
Parent-Centered	23	36%
Cost	(6)	(9%)
Location	(5)	(8%)
Hours	(4)	(6%)
Other	(8)	(13%)
Child Centered	18	28%
Age	(7)	(11%)
Physical Needs	(2)	(3%)
Social needs	(1)	(2%)
Educational needs	(1)	(2%)
Emotional needs	(1)	(2%)
Other	(6)	(9%)
Caregiver Characteristics	11	17%
Relative	(2)	(3%)
Friend of Parent	(2)	(3%)
Experienced	(1)	(2%)
Daily Program	(3)	(5%)
Other	(3)	(5%)
Situational Reason	12	19%
No Other Choice Available	(11)	(17%)
Other	(1)	(2%)
TOTAL	64	100%

Table 5.4: MAIN REASON FOR SELECTING FAMILY DAY CARE
TOTAL SAMPLE

N = 291

MAIN REASON	Frequency	Percent
Parent-Centered	89	31%
Cost	(49)	(17%)
Convenience to parent	(32)	(11%)
Other	(8)	(3%)
Child-Centered	80	27%
Age	(7)	(2%)
Special attention	(41)	(14%)
Home provides good care	(11)	(4%)
Home meets childs' physical, emotional, social and, educational needs	(15)	(5%)
Other	(6)	(2%)
Situational	80	27%
No other choice available	(31)	(11%)
No opening in center	(5)	(2%)
Children must be toilet trained to attend center	(2)	(1%)
Children under 2 not accepted by center	(27)	(9%)
Center facilities deficient	(6)	(2%)
Social Work/Agency Chose Caregiver	(8)	(3%)
Other	(1)	(*)
Caregiver Characteristics	19	7%
Relative	(2)	(1%)
Friend of parent	(2)	(1%)
Parent liked caregiver	(8)	(3%)
Caregiver experience	(1)	(*)
Daily program	(3)	(1%)
Other	(3)	(1%)
Remaining Reasons Cited	23	8%
Parent referred to caregiver	(9)	(3%)
Parent never considered In-home care	(3)	(1%)
Other	(11)	(4%)
TOTAL	291	100%

*Less than 1%

Table 5.5: PARENTAL CONSIDERATION OF OTHER TYPES OF CARE AS A FUNCTION OF ETHNICITY

TOTAL SAMPLE

N = 339

Parental Consideration

ETHNICITY	Yes	No	TOTAL
White	67 (46%) (49%)	79 (54%) (39%)	146 (43%)
Black	39 (34%) (28%)	74 (66%) (37%)	113 (33%)
Hispanic	32 (40%) (23%)	48 (60%) (24%)	80 (24%)
TOTAL	138 (41%)	201 (59%)	339

Table 5.6: PARENTAL CONSIDERATION OF OTHER TYPES OF CARE BY EDUCATION

TOTAL SAMPLE

N = 347

Parental Consideration

EDUCATION	Yes	No	TOTAL
High School or Less	64 (38%) (45%)	106 (62%) (52%)	170 (49%)
Some College or More	78 (44%) (55%)	99 (56%) (48%)	177 (51%)
TOTAL	142 (41%)	205 (59%)	347

Table 5.7A: PARENTAL WORK SCHEDULE
TOTAL SAMPLE

N = 311

WORK SCHEDULE	Frequency	Percent
All day	263	85
Variable	26	8
Rotating	9	3
Morning Only	7	2
Evening or Night	6	2
TOTAL	311	100

Table 5.7B: PARENT WORK SCHEDULE AS A FUNCTION OF ETHNICITY
TOTAL SAMPLE

N = 306

WORK SCHEDULE	ETHNICITY			
	White	Black	Hispanic	TOTAL
All Day	110 (43%) (79%)	77 (30%) (85%)	68 (27%) (89%)	255 (83%)
Variable	18 (69%) (13%)	4 (15%) (4%)	4 (15%) (5%)	26 (8%)
Rotating	3 (33%) (2%)	3 (33%) (3%)	3 (33%) (4%)	9 (3%)
Morning Only	4 (57%) (3%)	3 (43%) (3%)	0	7 (2%)
Evening or Night	2 (33%) (1%)	3 (50%) (3%)	1 (17%) (1%)	6 (2%)
Other	2 (66%) (1%)	1 (33%) (1%)	0	3 (1%)
TOTAL	139 (45%)	91 (28%)	76 (25%)	306

Table 5.8: PARENTAL WORK SCHEDULE BY TYPE OF FAMILY DAY CARE HOME

TOTAL SAMPLE

N = 308

WORK SCHEDULE	TYPE OF HOME			
	Sponsored	Regulated	Unregulated	TOTAL
All Day	65 (25%) (84%)	100 (39%) (85%)	91 (36%) (80%)	256 (36%)
Variable	5 (19%) (6%)	10 (38%) (9%)	11 (42%) (10%)	26 (8%)
Rotating	3 (33%) (4%)	2 (22%) (2%)	4 (44%) (4%)	9 (3%)
Morning Day	1 (14%) (1%)	3 (43%) (3%)	3 (43%) (3%)	7 (2%)
Evening or Night	3 (50%) (4%)	1 (17%) (1%)	2 (33%) (2%)	6 (2%)
Other	0	1 (25%) (1%)	3 (75%) (3%)	4 (1%)
TOTAL	77 (25%)	117 (38%)	114 (37%)	308

Table 5.9: REASONS FOR SELECTION OF CURRENT CAREGIVER
PHILADELPHIA AND SAN ANTONIO

N = 196

MAIN REASON	Frequency	Percent
Caregiver personality	38	19%
Convenient location	30	15%
Referred by other persons (other than agency)	24	12%
Caregiver a relative	21	11%
Caregiver was only	16	8%
Caregiver teaching skill	15	8%
Caregiver experience	13	7%
Caregiver a friend or neighbor	13	7%
Other	10	5%
Good facility	6	3%
Referred by agency	3	2%
Flexible hours	3	2%
Low number of children	2	1%
Presence of other children related to child	2	1%
TOTAL	196	100%

Table 5.10: MAIN REASONS FOR SELECTING CURRENT CAREGIVER
LOS ANGELES

N = 105

MAIN REASON	Frequency	Percent
Caregiver-Centered	64	61%
Caregiver's a relative	(10)	(10%)
Caregiver's a friend	(6)	(6%)
Caregiver's personality	(13)	(12%)
Caregiver's experience	(8)	(8%)
Caregiver's program	(2)	(2%)
Other caregiver-related reasons	(25)	(24%)
Parent-Centered	23	22%
Cost	(3)	(3%)
Location	(8)	(8%)
Flexibility	(1)	(1%)
No other preference	(2)	(2%)
Other parent-centered reasons	(9)	(9%)
Situational	15	11%
No other choice available	(6)	(6%)
Other situational reasons	(9)	(9%)
Child-Centered	3	3%
Child's emotional needs	(1)	(1%)
Other child-centered reasons	(2)	(2%)
TOTAL	105	100%

Table 5.11: MAIN REASON FOR SELECTING CURRENT CAREGIVER PHILADELPHIA AND SAN ANTONIO

N = 196

MAIN REASON	Frequency	Percent
Caregiver-Centered	134	65%
Caregiver's personality	(38)	(18%)
Caregiver was referred by other persons (excluding agency)	(34)	(17%)
Caregiver's a relative	(21)	(10%)
Caregiver's teaching skill	(15)	(7%)
Caregiver's experience	(13)	(6%)
Caregiver's a friend or neighbor	(13)	(6%)
Parent-Centered	33	16%
Convenient location	(30)	(15%)
Flexible hours	(3)	(1%)
Situational	25	12%
Caregiver was only	(16)	(8%)
Good facility	(6)	(8%)
Referred by agency	(3)	(1%)
Child-Centered	4	2%
Low number of children	(2)	(1%)
Presence of other	(2)	(1%)
Other		5
TOTAL	196	100%

Table 5.12: MAIN REASONS FOR SELECTING CURRENT CAREGIVER
TOTAL SAMPLE

N = 311

MAIN REASON	Frequency	Percent
Caregiver-Centered	198	64%
Caregiver's personality	(51)	(16%)
Caregiver's a relative	(31)	(10%)
Caregiver referred by other persons (excluding an agency referral)	(34)	(11%)
Caregiver's experience	(21)	(7%)
Caregiver's a friend or neighbor	(19)	(6%)
Caregiver's teaching skills	(15)	(5%)
Caregiver's program in	(2)	(1%)
Other	(25)	(8%)
Parent-Centered	56	18%
Convenient Location	(38)	(12%)
Flexible hours	(4)	(1%)
Cost	(3)	(1%)
No other preference	(2)	(1%)
Other	(9)	(3%)
Situational	40	13%
Caregiver only choice available	(22)	(7%)
Good facility	(6)	(2%)
Referred by an agency	(3)	(1%)
Other	(9)	(3%)
Child-Centered	7	2%
Low number of children	(2)	(1%)
Presence of other children related to child	(2)	(1%)
Child's emotional needs	(1)	(*)
Other	(2)	(1%)
Other		(3%)
TOTAL	311	100%

*Less than 1%

Table 5.13: INFORMATION SOURCES FOR FINDING CHILD CARE
LOS ANGELES

CHILD INFORMATION SOURCES	PARENTAL USE OF SOURCES			
	Current Arrangement		Future Arrangment	
	Frequency	Percent	Frequency	Percent
Friend or Neighbor	31	30%	21	21%
Relative	15	14%	6	6%
Referral	21	20%	17	17%
Advertisement	7	7%	11	11%
Sponsor	7	7%	15	15%
Licensing Agency	1	1%	5	5%
Welfare Agency	2	2%	1	1%
Word of Mouth	6	6%	8	8%
Parent in FDC	0	0%	2	2%
Other	13	13%	12	12%
TOTAL	103 (98%)		98 (93%)	

Table 5.14: SOURCES FOR LOCATING CAREGIVER* PHILADELPHIA AND SAN ANTONIO

N = 243

SOURCES	PARENTAL USE OF SOURCES			
	Current Arrangement		Future Arrangement	
	Frequency	Percent	Frequency	Percent
Advertisement by caregiver	26	11%	66	27%
Advertisement by respondent	9	4%	28	12%
Friend or Neighbor	79	32%	89	37%
Relative	31	13%	25	10%
Caregiver is a relative	14	6%	11	5%
Caregiver is a friend or neighbor	26	11%	16	7%
Sponsoring agency	39	16%	38	16%
Information and referral agency	14	6%	28	12%
Licensing Agency	6	2%	15	6%
Registering Agency	0	0%	12	5%
Welfare Agency	15	6%	22	9%
Parent of children in family day care home	8	3%	11	5%
Informal meeting with caregiver	7	3%	10	4%
Other	15	6%	39	16%

* Numbers may total greater than study N of 243 because multiple responses were permitted.

Table 5.15: INFORMATION PARENTS ASKED CAREGIVERS PHILADELPHIA AND SAN ANTONIO

N = 243*

INFORMATION SOUGHT BY PARENTS	Frequency	Percent
Spoke to social worker about caregiver	81	33%
Experience	44	18%
Child rearing philosophy	25	10%
Family members	22	9%
Health	14	6%
Training	8	3%
Reliability	8	3%
Caregiver's personality	7	3%
Age	5	2%
Education	4	2%
Ethnicity	2	1%
Community ties	2	1%
TOTAL NUMBER OF RESPONSES	222	

*Multiple responses were accepted; therefore, the total is not 100%.

Table 5.16: INFORMATION PROVIDED TO PARENTS BY CAREGIVERS CONCERNING THEMSELVES BEFORE THE CAREGIVING ARRANGEMENT

PHILADELPHIA AND SAN ANTONIO

N = 243*

INFORMATION GIVEN BY CAREGIVER	Frequency	Percent
Experience	78	32%
Family members	67	28%
Child rearing philosophy	23	9%
Health	13	5%
Caregiver's personality	13	5%
Training	11	4%
Age	10	4%
Education	10	4%
Reliability	8	3%
Community ties	8	3%
Ethnicity	3	1%
Smoking habits	1	(**)
Social worker acted as intermediary	15	4%
Other	28	8%
TOTAL NUMBER OF RESPONSES	348	

*Multiple responses were accepted; therefore, the total is not 100%

**Less than 1%

Table 5.17: INFORMATION PARENTS ASKED OF CAREGIVER CONCERNING THE FAMILY DAY CARE SERVICES PROVIDED IN THE HOME

PHILADELPHIA AND SAN ANTONIO

N = 243*

INFORMATION SOUGHT BY PARENT	Frequency	Percent
Nutrition	84	35%
Hours of care	60	25%
Child Schedule	49	20%
Cost/payment	45	19%
Group size/ age mix	44	18%
Recreation play	34	14%
Supervision	28	12%
Toilet training	23	9%
Health	19	8%
Facilities	17	7%
Special services	16	7%
Education	13	5%
Regulation	8	3%
Caregiver experience	8	3%
Safety	6	2%
Socialization	5	2%
Transportation	3	1%
Spoke to social worker	38	16%
Other	9	4%
TOTAL NUMBER OF RESPONSES	509 177	

*Multiple responses were accepted; therefore, the total is not 100%.

Table 5.18: INFORMATION PROVIDED TO PARENTS BY CAREGIVERS CONCERNING THE FAMILY DAY CARE SERVICES IN THE HOME

PHILADELPHIA AND SAN ANTONIO

N = 243*

INFORMATION GIVEN BY CAREGIVERS	Frequency	Percent
Nutrition	129	53%
Recreation/play	61	25%
Hours of care	60	25%
Child Schedule	51	21%
Cost/payment	51	21%
Group size age mix	37	15%
Supervision	32	13%
Special services	30	12%
Toilet training	27	11%
Facilities	24	10%
Education	23	9%
Health	14	6%
Regulation	12	5%
Socialization	11	5%
Safety	10	4%
Transportation	10	4%
Spoke to social worker	35	14%
Other	19	8%
TOTAL NUMBER OF RESPONSES	726	

*Multiple responses were accepted; therefore, the total is not 100%.

Table 5.19: TRADE-OFFS IN DECISIONS ABOUT CAREGIVER
LOS ANGELES

N = 105

REASON	Frequency	Percent
No trade-offs made	64	61%
Too expensive	4	4%
Didn't like location	3	3%
Transportation problem	1	1%
Inconvenient hours	1	1%
Activities different	1	1%
Parent didn't like sitter	1	1%
Parent didn't like facility (home)	5	5%
Sitter unreliable	1	1%
Other	23	22%
TOTAL	105	100%

Table 5.26: ASPECTS OF THE HOME PARENTS DID NOT LIKE AT THE TIME OF ARRANGEMENT

LOS ANGELES

TYPE OF HOME	RESPONSES (VERBATIM)
Sponsored	"Kept dog inside house. Child was allergic to dogs."
	"Unsure of how sitter would work out because didn't know her very well."
	"Sitter couldn't (wouldn't?) take child to Head Start every day."
	"There were no children of the Target Child's age group available at the caregiver's for child to interact with."
	"I was uncomfortable with her."
	"Caregiver's child was very rough and aggressive and my child was not."
	"Caregiver smokes."
	"Didn't like the fact that sitter had a dog."
	"Lack of cleanliness."
Regulated	"Feeds child junk foods."
	"Didn't like her personality. Her personality was different. She seemed to be too different but later we changed our opinion after we got to know her."
	"She had a large dog."
	"Baby sitter not keeping close watch on children."
	"Pets: 2 cats, 3 dogs. Kept pets inside."
	"She never gave me a chance to see where she put the baby."
	"Caregiver had a dog."
Unregulated	"That one wasn't very educated and I felt my child would not learn very much."
	"Caring for other children."
	"Absent-minded babysitter."
	"Her (sitter's) children were sickly - staying home from school."
	"Sitter was pregnant; question of reliability."
	"She (sitter) gets upset if I am late in the evening."
	"Crowded household....living with two families."

Table 5.21: USE OF PRIOR DAY CARE ARRANGEMENTS BY REGULATORY STATUS

TOTAL SAMPLE

N = 345

	REGULATORY STATUS			
USED	Sponsored	Regulated	Unregulated	TOTAL
YES	65 (34%) (64%)	69 (37%) (55%)	55 (29%) (47%)	189 (55%)
NO	36 (23%) (36%)	57 (37%) (45%)	63 (40%) (53%)	156 (45%)
TOTAL	101 (29%)	126 (37%)	118 (34%)	345

Table 5.22: USE OF PRIOR DAY CARE ARRANGEMENTS BY ETHNICITY

TOTAL SAMPLE

N = 337

	ETHNICITY			
USED	White	Black	Hispanic	TOTAL
YES	85 (46%) (59%)	41 (22%) (36%)	57 (31%) (71%)	183 (54%)
NO	59 (38%) (41%)	72 (47%) (64%)	23 (15%) (29%)	154 (46%)
TOTAL	144 (43%)	113 (33%)	80 (24%)	337

Table 5.23: LAST CHILD CARE ARRANGEMENT BY ETHNICITY

TOTAL SAMPLE

N = 185

ETHNICITY	PREVIOUS ARRANGEMENT			
	Family Day Care	In Home Care	Other	TOTAL
White	59 (70%) (50%)	15 (18%) (36%)	10 (12%) (45%)	84 (46%)
Black	30 (73%) (25%)	6 (15%) (14%)	5 (12%) (23%)	41 (23%)
Hispanic	29 (51%) (25%)	21 (37%) (50%)	7 (12%) (32%)	57 (31%)
TOTAL	118 (64%)	42 (23%)	22 (12%)	182

Table 5.24: LAST CHILD CARE ARRANGEMENT BY REGULATORY STATUS

TOTAL SAMPLE

N = 190

REGULATORY STATUS	PREVIOUS ARRANGEMENT			
	Family Day Care	In Home Care	Other	TOTAL
Sponsored	41 (63%) (34%)	18 (28%) (38%)	6 (9%) (27%)	65 (34%)
Regulated	45 (64%) (37%)	14 (20%) (30%)	11 (16%) (50%)	70 (37%)
Unregulated	35 (64%) (30%)	15 (27%) (32%)	5 (9%) (23%)	55 (30%)
TOTAL	121 (64%)	47 (25%)	22 (12%)	190

Table 5.25: MAIN REASONS FOR TERMINATION OF LAST PRIOR ARRANGEMENT

PHILADELPHIA AND SAN ANTONIO

N = 126

REASON	Frequency	Percent
Caregiver stopped caring for children	33	26%
Parents' needs changed	24	19%
Child not properly cared for	15	12%
Caregiver unreliable	12	10%
Child unhappy, did not like home	6	5%
Disagreement with caregiver	5	4%
Caregiver inflexible on hours	5	4%
Fee went up	5	4%
Parent stopped working, returned home	4	3%
Too many children in home	3	2%
Caregiver did not communicate enough with parent	2	2%
Parent completed school, returned home	2	2%
Other	10	8%
TOTAL	126	100%

Table 5.26: DURATION OF PREVIOUS ARRANGEMENT BY REGULATORY STATUS
LOS ANGELES

DURATION	Sponsored	Regulated	Unregulated	TOTAL
0 - 3 months	11 (48%) (44%)	9 (39%) (47%)	3 (13%) (18%)	23 (38%)
3 - 6 months	4 (31%) (16%)	7 (54%) (37%)	2 (15%) (12%)	13 (21%)
6 - 9 months	2 (20%) (8%)	1 (10%) (5%)	7 (70%) (41%)	10 (16%)
9 - 12 months	1 (33%) (4%)	0 (0%) (0%)	2 (67%) (12%)	3 (5%)
1 year	1 (100%) (4%)	0 (0%) (0%)	0 (0%) (0%)	1 (2%)
More than 1 year	6 (55%) (24%)	2 (18%) (11%)	3 (27%) (18%)	11 (18%)
TOTAL	25 (41%)	19 (31%)	17 (28%)	61

Table 5.27: DURATION OF PREVIOUS ARRANGEMENT BY ETHNICITY LOS ANGELES

DURATION	White	Black	Hispanic	TOTAL
0 - 3 months	9 (41%) (36%)	4 (18%) (31%)	9 (41%) (43%)	22 (37%)
3 - 6 months	5 (38%) (20%)	3 (23%) (23%)	5 (38%) (24%)	13 (22%)
6 - 9 months	6 (67%) (24%)	1 (11%) (8%)	2 (22%) (10%)	9 (15%)
9 - 12 months	2 (67%) (8%)	0 (0%) (0%)	1 (33%) (5%)	3 (5%)
1 year	0 (0%) (0%)	0 (0%) (0%)	1 (100%) (5%)	1 (2%)
More than 1 year	3 (27%) (12%)	5 (45%) (38%)	3 (27%) (14%)	11 (19%)
TOTAL	25 (42%)	13 (22%)	21 (36%)	59

Table 5.28: PREFERRED TYPE OF CARE FOR CHILDREN OF VARIOUS AGES*
LOS ANGELES

AGE OF CHILD	PREFERRED TYPE OF CARE							
	In-home Care	Family Day Care	Center Care	Head Start	Nursery School	Part Day Program	Other	TOTAL
Less than 2 years	39 (38%)	60 (58%)	2 (2%)	1(1%)	0 (0%)	0 (0%)	2 (2%)	104
2 years	22 (22%)	64 (63%)	9 (9%)	1 (1%)	4 (4%)	0 (0%)	2 (2%)	102
3 years	5 (5%)	38 (36%)	19 (18%)	9 (9%)	24 (23%)	4 (4%)	5 (5%)	104
4 years	2 (2%)	14 (14%)	9 (9%)	24 (23%)	36 (35%)	9 (9%)	9 (9%)	103
5 years	0 (0%)	9 (9%)	6 (6%)	13 (12%)	9 (9%)	7 (7%)	60 (58%)	104

* Each row represents a discrete question. Hence, row totals are ≤ 105, the N for Phase II.

Table 5.29: PREFERRED TYPE OF CARE FOR CHILDREN OF VARIOUS AGES*
PHILADELPHIA AND SAN ANTONIO

AGE OF CHILD	PREFERRED TYPE OF CARE						
	None	In-home Care by Relative	In-home Care by Non-Relative	Center Care	Family Day Care by Relative	Family Day Care By Non-Relative	TOTAL
Less than 1 yr.	1 (-%)	166 (70%)	19 (8%)	3 (1%)	20 (8%)	29 (12%)	238
1 year	0 (0%)	120 (50%)	28 (12%)	15 (6%)	26 (11%)	49 (21%)	238
2 years	0 (0%)	49 (21%)	15 (6%)	52 (22%)	35 (15%)	85 (36%)	6
3 years	4 (2%)	22 (9%)	12 (5%)	110 (46%)	19 (8%)	71 (30%)	238
4 years	4 (2%)	13 (5%)	8 (3%)	152 (64%)	11 (5%)	50 (21%)	238
5 years	2 (1%)	13 (6%)	11 (5%)	156 (66%)	7 (3%)	46 (20%)	236

*Each row represents a discrete question. Hence, row totals are ≤ 243, the N for Phase III.

Table 5.30: AGE OF TARGET CHILD BY PREFERRED TYPE OF CARE
LOS ANGELES

N = 83

AGE OF TARGET CHILD*	PREFERRED TYPE OF CARE							
	In-home Care	Family Day Care	Center Care	Head Start	Nursery School	Part Day Program	Other	TOTAL
Less than 1 year	4 (20%) (40%)	15 (75%) (36%)	0 (0%) (0%)	0 (0%) (0%)	0 (0%) (0%)	0 (0%) (0%)	1 (5%) (12%)	20 (24%)
2 years	5 (17%) (50%)	19 (66%) (45%)	2 (7%) (40%)	0 (0%) (0%)	2 (7%) (22%)	0 (0%) (0%)	1 (3%) (12%)	29 (35%)
3 years	1 (5%) (10%)	8 (42%) (19%)	2 (11%) (40%)	1 (5%) (14%)	5 (26%) (56%)	1 (5%) (50%)	1 (5%) (12%)	19 (23%)
4 years	0(0%) (0%)	0 (0%) (0%)	1 (14%) (20%)	3 (43%) (43%)	2 (29%) (22%)	1 (14%) (50%)	0 (0%) (0%)	7 (8%)
5 years	0 (0%) (0%)	0 (0%) (0%)	0 (0%) (0%)	3 (38%) (43%)	0 (0%) (0%)	0 (0%) (0%)	5 (62%) (62%)	8 (10%)
TOTAL	10 (12%)	42 (51%)	5 (6%)	7 (8%)	9 (11%)	2 (2%)	8 (10%)	83

*Because of the wording of the preference question, those parents with children in care under 1 year old and over 5, were removed in cross-tabulation.

Table 5.31: AGE OF TARGET CHILD BY PREFERRED TYPE OF CARE

PHILADELPHIA AND SAN ANTONIO

AGE OF TARGET CHILD	PREFERRED TYPE OF CARE						
	None	In-home Care by Relative	In-home Care by Non-Relative	Center Care	FDC Care by Relative	FDC Care by Non-Relative	TOTAL
Less than 1 year	-(0%) (0%)	1 (100%) (3%)	-(0%) (0%)	-(0%) (0%)	-(0%) (0%)	-(0%) (0%)	1 (1%)
1 year	-(0%) (0%)	21 (38%) (54%)	6 (11%) (43%)	5 (9%) (12%)	9 (16%) (41%)	14 (25%) (21%)	55 (29%)
2 years	-(0%) (0%)	11 (19%) (28%)	2 (3%) (14%)	16 (28%) (37%)	8 (14%) (36%)	21 (36%) (31%)	58 (31%)
3 years	-(0%) (0%)	5 (13%) (13%)	2 (5%) (14%)	11 (29%) (26%)	4 (11%) (18%)	16 (42%) (24%)	38 (20%)
4 years	2 (6%) (67%)	1 (3%) (3%)	4 (13%) (29%)	9 (29%) (21%)	1 (3%) (5%)	14 (45%) (21%)	31 (16%)
5 years	-(0%) (0%)	-(0%) (0%)	-(0%) (0%)	2 (50%) (5%)	-(0%) (0%)	2 (50%) (3%)	4 (2%)
More than 5 years	1 (100%) (33%)	-(0%) (0%)	-(0%) (0%)	-(0%) (0%)	-(0%) (0%)	(0%) (0%)	1 (1%)
TOTAL	3 (2%)	39 (21%)	14 (7%)	43 (23%)	22 (12%)	67 (36%)	188

Table 5.32: PREFERRED TYPE OF CARE COMPARED TO ACTUAL TYPE OF CARE BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 240

ACTUAL / PREFERRED	SPONSORED		REGULATED		UNREGULATED		TOTAL	
	FDC RELATIVE	FDC NON-RELATIVE	FDC RELATIVE	FDC NON-RELATIVE	FDC RELATIVE	FDC NON-RELATIVE	FDC RELATIVE	FDC NON-RELATIVE
In-home care by relative	0 (0%)	5 (24%) (8%)	0 (0%)	8 (38%) (10%)	7 (100%) (30%)	8 (38%) (12%)	7 (25%)	21 (10%)
In-home care by non-relative	0 (0%)	2 (13%) (3%)	1 (100%) (25%)	8 (50%) (10%)	0 (0%)	6 (38%) (9%)	1 (4%)	16 (8%)
Center-based care	0 (0%)	25 (45%) (38%)	1 (20%) (25%)	20 (36%) (24%)	4 (80%) (17%)	11 (20%) (17%)	5 (18%)	56 (26%)
Family day care by relative	1 (7%) (100%)	1 (11%) (2%)	2 (13%) (50%)	4 (44%) (5%)	12 (80%) (52%)	4 (44%) (6%)	15 (54%)	9 (4%)
Family day care by non-relative	0 (0%)	32 (29%) (49%)	0 (0%)	43 (39%) (52%)	0 (0%)	35 (32%) (55%)	0 (0%)	110 (52%)
TOTAL	1*	65 (31%) (31%)	4 (14%) (14%)	83 (39%) (39%)	23 (82%) (82%)	64 (30%) (30%)	28	212

1* Less than 1%

○ = Cells in which parents were using their preferred choice.

Table 5.33: PREFERRED TYPE OF CARE COMPARED TO ACTUAL TYPE OF CARE BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 232

ACTUAL / PREFERRED	White		Black		Hispanic		TOTAL	
	FDC RELATIVE	FDC NON-RELATIVE	FDC RELATIVE	FDC NON-RELATIVE	FDC RELATIVE	FDC NON-RELATIVE	FDC RELATIVE	FDC NON-RELATIVE
In-home care by relative	1 (14%) (20%)	9 (45%) (9%)	3 (43%) (23%)	6 (30%) (9%)	3 (43%) (33%)	5 (25%) (14%)	7 (26%)	20 (10%)
In-home care by non-relative	0 (0%) (0%)	7 (50%) (7%)	0 (0%) (0%)	2 (14%) (3%)	1 (100%) (11%)	5 (36%) (14%)	1 (4%)	14 (7%)
Center-based care	1 (20%) (20%)	16 (30%) (16%)	4 (80%) (31%)	32 (59%) (46%)	0 (0%) (0%)	6 (11%) (16%)	5 (19%)	54 (26%)
Family day care by relative	○ 3 (21%) (60%)	3 (33%) (3%)	○ 6 (43%) (46%)	4 (44%) (6%)	○ 5 (36%) (56)	2 (22%) (5%)	14 (52%)	9 (4%)
Family day care by non-relative	0 (0%) (0%)	○ 63 (58%) (64%)	0 (0%) (0%)	○ 26 (24%) (37%)	0 (0%)	○ 19 (18%) (51%)	0 (0%)	108 (53%)
TOTAL	5 (19%)	98 (48%)	13 (48%)	70 (34%)	9 (33%)	37 (18%)	27	205

○= Cells in which parents were using their preferred choice.

Table 5.34: RELATIVE CARE BY SITE

N = 345

PARENT RELATIONSHIP TO CAREGIVER	SITE			
	Los Angeles	Phila-delphia	San Antonio	TOTAL
Non-Relative	92 (30%) (88%)	113 (37%) (95%)	99 (32%) (82%)	304 (88%)
Relative	13 (32%) (12%)	6 (15%) (5%)	22 (54%) (18%)	41 (12%)
TOTAL	105 (30%)	119 (34%)	121 (35%)	345

Table 5.35A: RELATIVE CARE BY REGULATORY STATUS

TOTAL SAMPLE

N = 337

PARENT RELATIONSHIP TO CAREGIVER	REGULATORY STATUS			
	Sponsored	Regulated	Unregulated	TOTAL
Non-Relative	96 (32%) (96%)	116 (39%) (96%)	85 (29%) (73%)	297 (88%)
Relative	4 (10%) (4%)	5 (12%) (4%)	31 (78%) (27%)	40 (12%)
TOTAL	100 (30%)	121 (36%)	116 (34%)	337

Table 5.35B: RELATIVE CARE BY ETHNICITY

TOTAL SAMPLE

N = 337

PARENT RELATIONSHIP TO CAREGIVER	ETHNICITY			
	White	Black	Hispanic	TOTAL
Non-Relative	139 (47%) (96%)	93 (31%) (84%)	65 (22%) (80%)	297 (88%)
Relative	6 (15%) (4%)	18 (45%) (16%)	16 (40%) (20%)	40 (12%)
TOTAL	145 (43%)	111 (33%)	81 (24%)	337

Table 5.36A: RELATIVE CARE BY RELATIONSHIP TO CHILD BY ETHNICITY

TOTAL SAMPLE

N = 40

RELATIONSHIP	White	Black	Hispanic	TOTAL
Grandmother or Grandfather	2 (7%) (33%)	15 (52%) (88%)	12 (41%) (71%)	29 (72%)
Aunt or Uncle	3 (43%) (50%)	1 (14%) (6%)	3 (43%) (18%)	7 (18%)
Other	1 (25%) (17%)	1 (25%) (6%)	2 (50%) (12%)	4 (10%)
TOTAL	6 (15%)	17 (42%)	17 (42%)	40

Table 5.36B: RELATIVE CARE BY RELATIONSHIP TO CHILD BY REGULATORY STATUS

TOTAL SAMPLE

N = 41

RELATIONSHIP	Sponsored	Regulated	Unregulated	TOTAL
Grandmother or Grandfather	0 (0%) (0%)	2 (7%) (40%)	27 (93%) (84%)	29 (71%)
Aunt or Uncle	1 (12%) (25%)	3 (38%) (60%)	4 (50%) (13%)	8 (19%)
Other	3 (75%) (75%)	0 (0%) (0%)	1 (25%) (3%)	4 (10%)
TOTAL	4 (10%)	5 (12%)	32 (78%)	41

Table 5.37: MAIN REASONS FOR SELECTING PARTICULAR CAREGIVER FOR PARENTS USING RELATIVE CARE BY ETHNICITY

PHILADELPHIA AND SAN ANTONIIO

N = 31

MAIN REASONS	White	Black	Hispanic	TOTAL
Caregiver's skill in teaching children	-	-	3	3
Caregiver's personality	-	2	-	2
Caregiver's experience	-	1	-	1
Referred by an agency	-	-	-	-
Referred by other persons (not an agency)	-	-	-	-
Good facilities	-	-	-	-
Caregiver hours flexible	-	-	-	-
Location convenient	1	1	-	2
Low number of children	-	-	1	1
Caregiver friend or neighbor	-	-	-	-
Caregiver's a relative	4	8	7	19
Only available person	-	1	1	2
Presence of children related to child	-	-	-	-
Other	-	-	1	1
TOTAL	5	13	13	31

Table 5.38: ADVANTAGE OF RELATIVE CARE PHILADELPHIA AND SAN ANTONIO

N = 28

REASONS	Frequency Cited	Percent
Cost	2	3%
Hours	7	12%
Special Services	7	12%
Parent/Caregiver Communication	7	12%
Caregiver Reliability	10	17%
Child's Emotional Needs	8	14%
Other	17	29%
TOTAL	58	100%

Table 5.39A: PARENTS PLANNING TO TERMINATE WITHIN SIX MONTHS BY ETHNICITY

LOS ANGELES

N = 105

ETHNICITY	NO	YES	TOTAL
White	26 (62%) (36%)	16 (38%) (50%)	42 (40%)
Black	23 (82%) (32%)	5 (18%) (16%)	28 (27%)
Hispanic	24 (69%) (33%)	11 (31%) (34%)	35 (33%)
TOTAL	73 (70%)	32 (30%)	105

Table 5.39B: REASONS FOR TERMINATION

LOS ANGELES

N = 31

REASON	PARENTS RESPONDING	
	Frequency	Percent
If parent becomes unemployed	7	23%
Respondent Seeking Alternative Arrangement	4	13%
Respondent Seeking Preferred Care	2	6%
Child Ready for School	3	10%
Other	15	48%
TOTAL	31	100%

Table 5.40: DURATION PARENT INTENDS TO MAINTAIN ARRANGEMENT BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 230

DURATION	Sponsored	Regulated	Unregulated	TOTAL
0 - 3 months	4 (20%) (6%)	7 (35%) (8%)	9 (45%) (11%)	20 (9%)
3 - 6 months	2 (22%) (3%)	3 (33%) (4%)	4 (44%) (5%)	9 (4%)
6 - 9 months	11 (48%) (17%)	8 (35%) (9%)	4 (17%) (5%)	23 (10%)
9 - 12 months	8 (27%) (12%)	15 (50%) (17%)	7 (23%) (9%)	30 (13%)
1 year	5 (19%) (8%)	8 (30%) (9%)	14 (52%) (18%)	27 (12%)
More than 1 year	35 (29%) (54%)	45 (37%) (52%)	41 (34%) (52%)	121 (53%)
TOTAL	65 (28%)	86 (37%)	79 (34%)	230

Table 5.41: DURATION PARENT INTENDS TO MAINTAIN ARRANGEMENT BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 222

DURATION	White	Black	Hispanic	TOTAL
0 - 3 months	8 (42%) (8%)	7 (37%) (9%)	4 (21%) (9%)	19 (9%)
3 - 6 months	4 (57%) (4%)	3 (43%) (4%)	0 (0%) (0%)	7 (3%)
6 - 9 months	9 (39%) (9%)	11 (48%) (14%)	3 (13%) (7%)	23 (10%)
9 - 12 months	18 (62%) (18%)	9 (31%) (11%)	2 (7%) (4%)	29 (13%)
1 year	10 (39%) (10%)	11 (42%) (14%)	5 (19%) (11%)	26 (12%)
More than 1 year	49 (42%) (50%)	38 (32%) (48%)	31 (26%) (69%)	118 (53%)
TOTAL	98 (44%)	79 (36%)	45 (20%)	222

Table 5.42: PARENTS' MAIN REASON FOR TERMINATING CURRENT ARRANGEMENT IN THE FUTURE BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 96

MAIN REASON	White	Black	Hispanic	TOTAL
Parent Moving	11 (79%) (23%)	3 (21%) (8%)	0 (0%) (0%)	14 (15%)
Child will go to school	12 (52%) (26%)	5 (22%) (14%)	6 (26%) (50%)	23 (24%)
Child will go to center when old enough	8 (32%) (17%)	15 (60%) (41%)	2 (8%) (17%)	25 (26%)
Child will go to center when space is available	1 (33%) (2%)	2 (67%) (5%)	0 (0%) (0%)	3 (3%)
Low educational quality of home	1 (20%) (2%)	4 (80%) (11%)	0 (0%) (0%)	5 (5%)
Home not clean enough/safe enough	1 (50%) (2%)	1 (50%) (3%)	0 (0%) (0%)	2 (2%)
Sponsor will determine home/center	5 (83%) (11%)	0 (0%) (0%)	1 (17%) (8%)	6 (6%)
Financial reasons	1 (50%) (2%)	1 (50%) (3%)	0 (0%) (0%)	2 (2%)
Other	7 (44%) (15%)	6 (38%) (16%)	3 (19%) (25%)	16 (17%)
TOTAL	47 (49%)	37 (39%)	12 (12%)	96

Table 5.43: PARENTS' MAIN REASON FOR TERMINATING CURRENT ARRANGEMENT IN THE FUTURE (ONLY PARENTS ANTICIPATING DURATION LESS THAN 1 YEAR) BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 100

MAIN REASON	Sponsored	Regulated	Unregulated	TOTAL
Parent moving	4 (29%) (13%)	6 (43%) (16%)	4 (29%) (12%)	14 (14%)
Child will go to school	7 (29%) (23%)	7 (29%) (18%)	10 (42%) (31%)	24 (24%)
Child will go to center when old enough	9 (35%) (30%)	10 (38%) (26%)	7 (27%) (22%)	26 (26%)
Child will go to center when space is available	3 (75%) (10%)	1 (25%) (3%)	0 (0%) (0%)	4 (4%)
Low educational quality of home	2 (40%) (7%)	3 (60%) (8%)	0 (0%) (0%)	5 (5%)
Home not clean enough/safe enough	0 (0%) (0%)	2 (100%) (5%)	0 (0%) (0%)	2 (2%)
Sponsor will determine home/center	3 (50%) (10%)	2 (33%) (5%)	1 (17%) (3%)	6 (6%)
Financial reasons	2 (100%) (7%)	0 (0%) (0%)	0 (0%) (0%)	2 (2%)
Other	0 (0%) (0%)	7 (41%) (18%)	10 (59%) (31%)	17 (17%)
TOTAL	30 (30%)	38 (38%)	32 (32%)	100

Parent Component
NDCHS

Printing Instruction

The list of additional NDCHS reports should be printed on the inside of the cover.

NDCHS FOLIO

Front (right)	Back (left)
Outside Cover	Volumes in the Final Report Series on the NDCHS
Inside (Title) Cover	Blank
Nat'l Day Care Home Study	Blank
iii	iv
v	vi
vii	viii
ix	Blank
xi	xii
xiii	xiv
xv	Blank
Chapter 1.0 (Cover)	Blank
1-1	1-2
1-3	-14
1-5	1-6
1-7	1-8
1-9	1-10
Chapter 2.0 (Cover)	Blank
2-1	2-2
2-3	2-4
2-5	2-6
2-7	2-8
2-9	2-10
2-11	2-12
2-13	2-14
2-15	2-16
2-17	2-18
2-19	2-20
2-21	2-22
2-23	2-24
2-25	Figure 2.1
Table 2.1 (1.0)	Table 2.1 (2.0)
Table 2.1 (2.0 cont.)	Table 2.1 (3.0)
Table 2.1 (3.0 cont.)	Table 2.1 (3.0 cont.)
Table 2.1 (3.0 cont.)	Table 2.1 (3.0 cont.)
Table 2.1 (4.0)	Table 2.1 (5.0)
Table 2.1 (5.0 cont.)	Table 2.2
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Chapter 6.0

PARENTAL EXPECTATIONS AND SATISFACTION

6.1 Introduction

Since parents are the consumers of family day care services, any intervention to improve services must take their views into account. Furthermore, parental decisions about the selection, maintenance, and termination of the care arrangement have a significant impact upon American children of this generation, as family day care is now the modal way in which young children are cared for outside the home. It is assumed that parental criteria for making these decisions are related to parents' general expectations of family day care and to their satisfaction with various facets of the particular arrangement.

Many aspects of the family day care arrangement may affect parental satisfaction. One such aspect is the parents' overall assessment of the suitability of the caregiver with regard to such factors as experience, personality, concern about children, and training in child care. Other important aspects include the parents' perceptions of what takes place in the family day care home and of how well their expectations are fulfilled. The child's intellectual, emotional, social, and physical development influence parental satisfaction. So do the physical qualities of the day care home, including the safety of the home, the nature of the outdoor play area (if any), the cleanliness of the home, the kind of food served, and other physical factors. Also important may be the parents' own needs for child care, such as hours of service and location. (The important issue of parental satisfaction with the cost of care is treated in Chapter 7.0 below.)

CSPD approached the task of analyzing parental expectations and satisfaction from this broad perspective throughout the study. Many items in the instruments used in both study phases reflect this concern. All findings should be viewed within the constraints of the sampling and other methodological procedures discussed in Chapters 2.0 and 3.0 above. The results of this analysis are summarized in Section 6.5, the final section of this chapter.

6.2 Parental Expectations and Satisfaction With Selected Family Day Care Aspects

The issue of parental satisfaction is one of the most important concerns of this study. By considering the assessments that parents make of their expectations of family day care, we can construct a clear notion of how the consumers of family day care evaluate day care services.

This chapter cannot elucidate the possible psychological impact upon some parents when they leave their young children with others for daytime care because they choose to work or are seeking schooling or other additional training. This experience, central to contemporary American family life and childrearing practice, is likely to be varied, complex, and profound; revealing findings can be expected to emerge from further research on this phenomenon.

6.2.1 Parents' Priorities for Child Care and Their Children

All parents in the study responded to open-ended questions that explored their expectations for themselves and their children. Thirty percent of the parents in Philadelphia and San Antonio stated that their primary requirement was a reliable caregiver (Table 6.1). Twenty-six percent of the respondents indicated that they wanted their children to develop conceptual and linguistic skills. A substantial percentage (23%) expressed concern that their children be well cared for. The need for good nutrition (21%) and the need for emotional support (21%) were important as well. Respondents also cited as priorities socialization (19%), the need for a home-like atmosphere (19%), good discipline (18%), a safe and clean environment (15%), and the need for their children to learn physical skills (12%) (Tables 6.1 and 6.3).

In Los Angeles, however, data reflected a stronger emphasis on emotional support for the child (Tables 6.2 and 6.4). This was mentioned by 42% of the parents. A safe clean, place for the child emerged as the second priority (27%), and the need for a dependable, reliable caregiver was mentioned by 19%. Educational training was a priority for 14% of the parents, as was good nutrition.[1]

Users of all homes, whether sponsored, regulated, or unregulated, indicated this pattern of priorities. Similarly, there were few dramatic differences by ethnicity. Closer and more intensive study of the childrearing and day care preferences of parents from the three ethnic groups would more precisely determine real and imagined differences between them with regard to these variables.

Special Needs of Children

When asked what their children's special and unusual needs were beyond basic day care, parents in Philadelphia and San Antonio most commonly mentioned the need to be with other children, with 27% of those parents noting this special need. Seventeen percent reported their children required toilet training and 13% mentioned infant care and tending (Tables 6.5 and 6.6). A few parents (9%) cited the need for special medication. In Los Angeles 29 parents cited such needs as toilet training, special attention because of overactivity, and feeding requirements. Very few had children with known learning disabilities or mental handicaps. However, the special needs of children with these conditions may still be a matter for some concern because handicapped parents and children are not adequately represented in the study. Though there were no major differences by home type, there was one ethnic difference, namely the more pronounced concern of White parents that their children have opportunities to interact with other children.

Parents in Philadelphia and San Antonio generally felt that their children's special needs were met all of the time (67%) or most of the time (23%), as noted in Tables 6.7A and 6.7B. Parents in Los Angeles, by an overwhelming margin, said that their needs were met satisfactorily. Only 10% of the Philadelphia and San Antonio parents responded that the caregiver met their children's special needs only some of the time or never. Those parents with children in regulated homes more frequently reported that their caregivers met the needs of their children all of the time.

In summation, what emerges from parents' general statements about their children's needs in family day care is a picture of normal young children whose parents want them to develop conceptually in a home-like environment. Parents want a reliable caregiver who provides strong emotional support to the children, good discipline, good nutrition, and opportunities for socialization. Parents perceived that their caregiver satisfactorily handled special or unusual needs.

6.2.2 Parent Satisfaction with Location, Physical Characteristics of the Home, and Nutrition

Beyond what parents want and need in family day care is the question of how they assess what they believe they are actually getting from current arrangements. How do they feel about the specific aspects of their present family day care homes?

Location

One of the first and most obvious concerns with a day care arrangement is location. Predictably, Black and Hispanic parents tended to use caregivers closer to home than did White parents. While 69% of White parents used caregivers who were more than a few blocks away, only 46% of Black and 59% of Hispanics did so (Tables 6.8A and 6.8B). This may be explained by the presence among Blacks and Hispanics of a stronger tradition of informal child care arrangements, and by a greater retention of the structures and supports of the extended family than is the present experience of many segments of the White community (Billingsley, 1968).

The most positive feelings on caregiver location reported by parents in Philadelphia and San Antonio related to the proximity of the day care home to the parents' residence. Some of the homes were apparently close to parents' places of employment or to a sibling's day care or school, which clearly figured into parental decisions regarding location. There were no dramatic differences among parents by regulatory status or ethnicity on this variable (Tables 6.9A and 6.9B). Seventy-two percent of the parents in Los Angeles were very satisfied with the location of their caregiver (Table 6.55). In general, the location of the family day care home was important, but not a subject of great dissatisfaction. In Los Angeles, only 10% of parents were dissatisfied with the location.

Physical Characteristics

Philadelphia and San Antonio respondents were asked directly how satisfied they were with a number of physical characteristics of their day care home. The level of satisfaction with these characteristics was found to be generally high, and there were few distinctions in the pattern of satisfaction among sponsored, regulated, and unregulated homes, or among White, Black, and Hispanic parents in either site.

Ninety-one percent of the Philadelphia and San Antonio parents found that there was enough space in their family day care homes, 1% said there was too much space, and 8% noted too little space (Table 6.10A and 6.10B). Ninety-two percent said the lighting was at the right level, while 8% said that lighting was insufficient (Table 6.11A and 6.11B). Ninety-two percent said the temperature was correct, while the rest said it was either too warm or too cold (Table 6.12A and 6.12B). Ninety-one percent said the home was clean enough, while 9% said it could be cleaner or was not clean (Table 6.13A and 6.13B). For all these aspects of the physical environment--space, light, temperature, and cleanliness--90% or more of parents were satisfied or very pleased, while fewer than one in ten experienced some level of dissatisfaction. Although this 10% of dissatisfied parents is a small number, it suggests enough of a problem to warrant the care and attention of the parent who is concerned with high quality care. These findings indicate that not every home will be physically satisfactory, though most will be.

Nutrition

Parents were less satisfied with the food served. Some 15% of Philadelphia and San Antonio respondents said their caregivers sometimes served foods that were undesirable--junk foods or salty foods, for example. Among respondents who relied on their caregiver for food, White and Black parents were more likely to find deficiencies than were Hispanic parents, and parents using sponsored or unregulated homes were more likely to be dissatisfied with food service than were those using regulated homes (Tables 6.14A and 6.14B). Many parents (approximately 33%) did not rely on caregivers for food, but sent all or part of their children's food to the family day care home. This may be a reflection of an intense parental concern with nutrition.[2]

In initial interviews, as reported in Chapter 5.0, parents and caregivers talked most about nutrition in the family day care home. Additionally, when parents were asked a series of questions exploring later communications with their caregiver, their concern about their child's eating habits was evident. To the question "What kinds of things do you most often ask the caregiver about your child?," 49% responded "How the child has eaten." (The child's behavior during the day was the concern of the majority--63%--of parents.) Respondents in Philadelphia and San Antonio also answered the question "What information is most helpful to you regarding your child?"

Next to the child's behavior, cited by 50% of parents as most helpful, "How the child has eaten" was considered most helpful by 36% of parents.

6.2.3 Parent Satisfaction with Group Composition in the Home

Group composition was an issue of some concern to parents, and it is one of the most common focal points for regulation. Group composition embraces both the size of the group and the age mix of the children in care. Regulations frequently deal with these in tandem--for example, by limiting the total number of permissible children more stringently when an infant is in care.

Group Size

The concern with the number of children in care did not figure as strongly in responses to general questions on day care preferences as it did in responses to more direct, specific items. Fully 57% of the Philadelphia and San Antonio study parents said that group size was very important; 38% said it was of some importance; only 5% indicated that this issue was of no importance (Tables 6.15A and 6.15B).[3] This pattern of interest prevailed for each ethnic and regulatory group. Reporting their feelings about what they were actually experiencing in this regard, 81% of these respondents said an appropriate number of children were in care, while some 20% said there were either too many (5%) or too few (15%) (Table 6.16).

It is interesting that only 5% said there were too many children, which may reflect the small home sizes in the study sample. This reinforces the finding, reported earlier, that there was an intense concern with providing association with other children. This need may be a result of the dwindling average size of new families in the U.S. population during the past generation or so. The increasingly frequent single-child family may be stimulating a rising parental concern with finding playmates for their children. Those who must work, who choose to do so, or who require child care for some other reason may look to family day care or other forms of day care to provide this experience.

Age Mix

A corollary issue is the mix of ages in the day care home. Some parents may want their children to be with others the same age. Others may want them to be with older or younger children, and still others may want their offspring to experience a variety of ages in the day care home, in simulation of a familial age distribution. Philadelphia and San Antonio parents were asked to make a hypothetical choice between a caregiver keeping children of the same age and one with a mix of ages. Both caregivers would have the same training and experience. While a few parents (5%) were indifferent to the issue, most (60%) preferred a mix of ages (Table 6.17A and 6.17B). A strong minority (35%) preferred their child to be with children of the same age.

The great majority of parents (86%) were satisfied with the age mix of their children's family day care home (Table 6.18). Thirteen percent of those responding were dissatisfied. Most of those dissatisfied (9% of the total) said the other children were too young, while only 3% of the total said they were too old; a very few, barely 1%, said the other children were both too young and too old.

6.2.4 Parent Expectations and Satisfaction with the Caregiver

A number of caregiver characteristics and practices were revealed to be of special concern in the parent component of the National Day Care Home Study.

Education and Experience

Parents in Philadelphia and San Antonio were asked to choose between two hypothetical caregivers: one was just out of college and held a degree in early childhood education, and the other had completed high school and had five years of day care experience. Both would care for the same number of children--five. The majority (82%) preferred the second caregiver (Table 6.20A and 6.20B), a strong endorsement of practical experience over higher education as a qualification for the provision of adequate care. While there was little difference by regulatory status on this question, Whites and Blacks valued college education over experience more frequently than Hispanics.

Faced with the necessity of choosing among several potential caregivers limited in both education and experience, parents would obviously resort to other decision criteria.

Level of Supervision

A number of other matters were significant as parents confronted their deepest concerns with caregiver practices. A key aspect of caregiver practice is the level of supervision the caregiver provides. Parents in Philadelphia and San Antonio were asked to assess the likelihood of caregivers leaving children unsupervised. Most of the 234 parents responding to this query (93%) said it was not likely that their caregiver would behave in this way (Tables 6.21A and 6.21B). Only a few (7%) reported that it was somewhat likely or very likely. This pattern represents a strong statement of basic parental confidence in caregivers. Furthermore, when directly asked about their satisfaction with the amount of supervision, parents in Philadelphia and San Antonio overwhelmingly reported that the supervision in the home was sufficient (Tables 6.22A and 6.22B). Only 4% said that there was not enough supervision, and only one parent said that the supervision was excessive. This pattern was consistent across ethnicity and regulatory status. Overall, parents appeared not only satisfied with but very confident in their caregivers.

Safety in the Home

Parents were asked to report accidents involving their child in the family day care home. Twenty percent of those responding in Philadelphia and San Antonio said their children had been in accidents with their current caregivers or with previous ones (5%) (Table 6.23A and 6.23B). Parents using unregulated care were somewhat more likely to report accidents with current or past caregivers, with more than one in four (28%) reporting such incidents, while only one in ten (11%) of those using regulated care and only one in five (19%) of those using sponsored care did so (Table 6.23A). There was very little difference among parents of different ethnicities.

Discipline

Discipline is one of the most controversial aspects of childrearing. Parents in Philadelphia and San Antonio were asked "How important is it for your caregiver to discipline your child in pretty much the same way you do?" Eight-two percent said it was very important and 17% said it was of some importance; only 2% felt it was not important that their caregivers discipline in the same way (Tables 6.24A and 6.24B). Little difference was apparent among parents of various ethnicities, but there was a slightly greater tendency for those in unregulated homes to feel that disciplinary consistency was very important. All parents responding in Los Angeles found their caregiver's disciplinary practices satisfactory.

Availability of Caregivers to Provide Care

Parents expected and apparently required caregivers to meet their needs for hours of care. For example, 92% of the parents in Philadelphia and San Antonio felt it was very important that their caregivers allow them to drop off and pick up their children at times convenient for themselves (Tables 6.25A and 6.25B). Data from interviews with caregivers on this issue revealed that in Los Angeles and Philadelphia, approximately 70% of the providers had established a set pick-up time; in San Antonio, however, only half the caregivers interviewed expected parents to pick up their children at a specified time (Vol II, AAI, 1980).

Most parents (97%) indicated that the caregiver's availability to provide care as needed was either very important or of some importance, with little variation by home type or ethnicity (Tables 6.26A and 6.26B). Parents additionally had strong feelings about the provision of care by a substitute provider. Nearly three out of four parents (73%) stated that it was very important to them that such substitutions not occur, and an additional 23% indicated this to be of some importance (Tables 2827A and 6.27B). Only 4% said that such substitutions were unimportant. White, Black, and Hispanic parents felt about the same level of concern, but there was a greater tendency for parents using regulated and unregulated care to say that avoiding substitutions was very important. This difference may be attributable to the fact that a common feature of sponsored homes is caregiver substitution to provide coverage for caregiver vacation, illness, or other time off. Hence, caregiver substitution may, in many instances, be a positive event enhancing the quality and consistency of care.

Only a few parents in San Antonio and Philadelphia (4%) reported that their caregivers often found other people to care for their children. Parents, in this respect, seemed to have fulfilled a priority by finding dependable, reliable caregivers. This conclusion is apparent, also, from a series of questions that asked parents how often their caregiver could not provide care and what impact such occurrences had upon them.

Fifty-one percent in Philadelphia and San Antonio said there was never a time when their caregivers could not provide care (Tables 6.28A and 6.28B). Almost all Los Angeles respondents reported their caregivers were always available. Notably, Hispanic parents in the sample more frequently said that their caregivers were always available when needed. Parents using sponsored homes were more likely to report that their caregiver was sometimes unavailable than were those using either regulated or unregulated care. The report of high availability among Hispanic parents may be partially explained by the significant proportion of relatives who cared for their children. The comparatively low availability of sponsored caregivers may be explained by some of the more formalized aspects of family day care in sponsored homes. Such homes may be more like businesses than the somewhat less formal unregulated and even regulated homes. Most family day care systems have policies of various kinds,[3] intended to ensure the uniformity of day care quality throughout the system, with some even limiting hours of care. These regulations may render many aspects of care more business-like and less like an extension of the parent's family structure and relationships.

Nearly half (49%) the respondents (116) in Philadelphia and San Antonio reported that there had been occasions when their providers were not available. In these instances, who took care of the children? Parents themselves provided care as reported by 26% of the sample, 26% turned to relatives, and 26% said their caregivers had substitute providers available. Sixteen percent relied on friends and neighbors.

The last two questions in the series explored the frequency of the caregivers' unavailability in the previous three months, and whether these occurrences represented a problem for parents. Of the 119 respondents, 34 reported there had not been a time in the last three months when their caregivers were unavailable. However, 47 parents, or 40%, said there had been one such occurrence, 17% reported there had been two, 7% said it had happened three times, and 8% said their caregivers could not provide care on more than three occasions. The parents reporting frequent occurrences represent only 4% of the total sample in Philadelphia and San Antonio, which is consistent with the percentage of parents who said their caregiver frequently obtained the services of substitute providers.

Those parents reporting any degree of caregiver unavailability in the previous three months were asked if such unavailability represented a problem for them. Seventy-six percent said it was not a problem and 24%, or 20 parents, said it was (Table 6.29A and 6.29B). Whites and Blacks were more likely to cite difficulty than Hispanics.

In summary, the data suggests that caregivers, as parents perceived them, are conscientious and dependable. It is remarkable, given the long hours of care, that over half the sample of parents said their caregivers were always there when they needed them. Of those reporting occasional times when caregivers could not care for their children, very few indicated this to be a problem.

6.2.5 Parent Satisfaction with Activities in the Family Day Care Home

Parents' feelings about the activities their children experience in the family day care home were explored in the parent interviews. Seventy-one percent of the parents in Philadelphia and San Antonio said they were satisfied with the activities in the home, while 29% expressed the view that the activities were satisfactory but could be improved (Table 6.30A and 6.30B). Only one parent was completely dissatisfied with the program in the family day care home. A few more Hispanic and Black parents (34% and 32%, respectively) felt the program could be improved than did White parents (24%). A firm majority of parents in Los Angeles were satisfied with their child's activities (Table 6.56).

More than one-half (52%) of the parents who felt the program in the provider's home could be improved would have preferred more emphasis on the development of conceptual and linguistic skills (Table 6.31). This group represents 12% of the respondents in Philadelphia and San Antonio. This finding is entirely consistent with the earlier observation that many parents were interested in the intellectual development of their children in family day care. Furthermore, the reader will recall that 48% of the parents in Philadelphia and San Antonio did not have their children in the care of their choice (Table 5.32). Of these, 53% (representing 25% of the total sample) preferred center-based care, which is often perceived as emphasizing conceptual and language skill development. Table 6.31 indicates that another 19% of the parents who expressed dissatisfaction with the program wanted more emphasis on the development of physical skills and abilities. The remaining parents expressed a preference for more social activities (5%), other activities (7%), or a combination of those mentioned previously (17%).

The parent interview further explored parents' program preferences by asking respondents to choose one of two hypothetical caregivers with the same training and experience. Both would emphasize educational activities. But, while one would allow children a lot of freedom to chose their activities, the other would direct most of the children's learning activities. Parents chose the more free environment by a ratio of three to two (61% to 40%), with parents using sponsored homes preferring direction (55%) more often than those using regulated (30%) or unregulated homes (38%) (Table 6.32A). More Black (48%) and

Hispanic parents (48%) preferred caregivers who planned and directed the children's activities than did White parents (30%) (Table 6.32B).

Parents in Philadelphia and San Antonio also chose between two distinct family day care home programs. Both hypothetical providers would care for the same number of children, and both would have the same training and experience. In one home there would be considerable play equipment. The children would spend most of their time in supervised play. In the second home, the caregiver would emphasize learning, and the children would spend most of their time with the caregiver in learning activities. Nearly three out of four (71%) parents chose the environment emphasizing learning (Table 6.33A). Of those parents who preferred play activities (24%), nearly half (47%) had their children in regulated homes. Black and Hispanic parents (74% and 83%, respectively) preferred the environment emphasizing learning more often than did White parents (Table 6.33B). It should be recognized that these were forced choice questions requiring a choice between two rather stark alternatives, while the normal choice is not so clear. Children learn from playing as well as from more directed learning activities; the caregivers who allow freedom of choice must also plan and supervise.

To summarize, some parents were not entirely satisfied with the program of activities in the family day care homes. More Black and Hispanic parents felt this way than did White parents. Of those who expressed dissatisfaction, many wanted their caregivers to emphasize conceptual and language skill development. This preference was consistent with the choice of the majority of parents for caregivers who provide a variety of learning experiences. Parents wanted caregivers to allow a choice of activities; they also preferred that the caregivers themselves participate with the children.

6.2.6 Special Services Provided in the Home

Statements were elicited from study parents on the availability and use of special services in the family day care home, such as care for a sick child or care on weekends or overnight. Among parents in Los Angeles, 45% reported the availability of evening care--the most frequently available special service. Thirty-five percent said their caregivers provided weekend care, 29% reported the availability of overnight care, and 27% indicated their caregivers would keep a seriously ill child (Table 6.34). Where available, parents used the service and expressed satisfaction with its quality (Table 6.55).

The Los Angeles data suggested that if parents did not need a particular service, they tended not to know whether their caregiver provided it. Therefore, the approach to this issue was revised in the instrument used in Philadelphia and San Antonio. Parents were first asked about their need for a particular service. If they expressed a need, then the respondents were asked a series of further questions concerning the availability, use, cost, and satisfaction with the particular special service. Fewer parents (15%) in Philadelphia and San Antonio (Table 6.35) reported the availability of overnight care than in Los Angeles (45%). Only 16% reported that their caregivers provided weekend care, and only 19% said that care for a seriously ill child was available.

These results are substantiated by data obtained from the caregivers. Independent caregivers were less flexible and less willing to provide other types of special or after-hours care other than care for mildly ill children. For example, across sites, typically less than one-third of the providers interviewed indicated they cared for children when they were seriously ill or during the evening; overnight and weekend care was found even less often. Moreover, most caregivers were very reluctant to provide care for children when it had not been previously arranged with the child's parents. Thus, although the potential for flexibility is much greater in homes than in centers, many family day care mothers did not feel it was within the realm of their responsibility to adapt their routines to provide these additional services. (Vol II, AAI, 1980.)

While it might be anticipated that the sponsored homes in a network designed to offer special services would indeed offer more of these services more often, this was not confirmed by the findings. Parents using the 35 sponsored homes in Los Angeles reported the special services available to them (Table 6.36). Responses indicated that 15 parents did not know whether special services were provided or not. This is understandable because caregivers in Los Angeles operating sponsored homes do not have exclusive use agreements--that is, they may serve families who are not referred through the sponsoring agency. Therefore, there were undoubtedly parents who were unaware of the affiliation of the home with a family day care system.

In Philadelphia and San Antonio, however, several services were more readily available (Table 6.37). Of the parents using the 67 sponsored homes, almost all reported they received help with finding day care, and 47 reported that the sponsoring agency would provide help in communicating with the caregiver. Thirty of the 67 parents said that financial help was available from the sponsoring agency, and 24 indicated the availability of educational services. A number of other services were also available, though not consistently throughout the sample. The levels of satisfaction with these services were high (Table 6.37), as they were for services reported by parents in Los Angeles.

The results of this focused consideration of special services that are offered in sponsored homes suggest that while some services may be widely available in the sponsored home environment, others, such as additional hours of care in the evening and on weekends, may be available only rarely. Many parents claimed a need for the more institutionally-oriented services; however, these services did not figure prominently in the basic needs summarized at the beginning of this chapter. Furthermore, the availability of these services may not be critical to parents when they assess their experience with family day care. The availability of the caregiver and the program of activities may be more fundamental.

6.3 Overall Parent Satisfaction with the Arrangement

In Philadelphia and San Antonio, parent satisfaction was approached indirectly by exploring, for example, advantages of family day care that parents had not anticipated, as well as their unmet expectations. Parents described negative experiences their child may have had, and their own assessment of what their child was getting out of the family day care arrangement. Finally, a series of questions explored parents' perceptions of their child's feelings about the caregiver and their own willingness to recommend their caregiver to others seeking child care.

Unexpected Benefits From Family Day Care

Among the most interesting measures of parental satisfaction are reports of unexpected benefits derived from day care. One-half (51%) of the parents in San Antonio and Philadelphia reported receiving unexpected benefits from the arrangement (Tables 6.38A and 6.38B). White and Hispanic parents tended to report slightly more frequently that they had received such benefits. There was no major difference among parents using various types of care. The nature of the benefits was remarkable. Nearly one-half (47%) the parents reporting unexpected benefits from family day care said that their children received much more individual attention than they had anticipated (Table 6.39). The observation data substantiates the perceptions of parents. Caregivers spent approximately 50% of their time interacting with children in some way. The most frequent type of interaction was some form of teaching, occurring 14% of the total observed time in 98% of the family day care homes. A considerable portion of the time caregivers were not directly involved with children was spent in preparing food or play activities or in monitoring play (17% of the observed time). Caregivers spent very little time with other adults or in lesiure activities, such as reading or watching television. Caregivers were actually out of range of the children only 1% of the time. (Vol. III, SRI International, 1980.)

Other benefits, each noted by fewer than 10% of these parents, included the favorable impact of the caregiver's personality on the child, good nutrition or food at no added cost, and the teaching of physical skills to the child by the caregiver.

In contrast to the substantial incidence of unexpected benefits cited by 51% of the parents, only a very few (13 parents) said their expectations had not been met (Tables 6.40A and 6.40B). This contrast is in itself a strong general endorsement of family day care by parents, the basic consumers of these services.

Parents responded to another question exploring unmet expectations and dissatisfaction: "Is there anything that you want your child to get out of the family day care arrangements, that he/she may not be getting now?" The majority (64%) did not express any expectation that had not been met. Of those who did, representing only a small fraction of the Philadelphia and San Antonio respondents, 18% cited the absence of conceptual and linguistic skill development; 8% had expected more learning of physical skills; and almost as many parents (7%) had expected more opportunities for their children to socialize (Tables 6.41A and 6.41B). There were no basic differences by either ethnicity or regulatory status.

Negative Experiences

Among the most dramatic, though not necessarily the most valid, measures of parent satisfaction with family day care is the incidence of bad experiences of children in this form of day care. Only one in ten (11%) of the parents in Philadelphia and San Antonio said their children had had a negative experience with the caregiver (Tables 6.42A and 6.42B). White parents were somewhat more likely to report such events than Black or Hispanic parents. Children in sponsored homes were slightly more likely to have had a negative experience than those in either regulated or unregulated homes. The nature of the experience was also revealing. Twenty-two percent of the parents (3% of the total sample) reporting such incidents said their child had been injured; 19% (3% of the total) indicated the bad experience was related to inadequate supervision; 14% (2% of the total) said their child had been left unattended; and another 14% (2% of the total) said their child had been physically abused (Table 6.43). Other types of bad experiences included inappropriate discipline (8%, or 1% of the total), emotional abuse (8%, or 1% of the total), and the presence of a safety hazard (6%, or less than 1% of the total). Some of the parents reporting bad experiences reported multiple incidents.

Benefits to the Child from Family Day Care

The instrument explored the benefits parents thought their children derived from the experience. The question posed was "What do you think your child is getting out of the family day care arrangement?" The most prominent benefit was socialization, mentioned by 62% of the respondents in Philadelphia and San Antonio (Tables 6.44A and 6.44B). This is related to the need stated by parents, reported previously, for their child to be with other children. While socialization is a general and in some senses vague concept, it is clear that parents want their children to learn how to deal with others smoothly and competently. The second most frequently cited benefit for the child from family day care was learning conceptual and linguistic skills, mentioned by 33% of respondents in Philadelphia and San Antonio. Twenty-two percent of these parents mentioned the presence of a homelike atmosphere as a benefit of family day care not available in the more formal setting of the day care center. Almost as many parents (19%) mentioned emotional support for their children as a benefit. Others mentioned the learning of physical skills (12%), good discipline (11%), good supervision (10%), good nutrition (6%), the presence of a dependable and reliable caregiver (3%), and/or the presence of a safe and clean environment (1%).

The pattern of these data suggests general satisfaction with family day care and the caregiver as assessed against the pattern of stated needs presented earlier. There was greater emphasis on cognitive learning benefits among parents using sponsored care, greater emphasis on socialization among parents using sponsored and regulated care, and slightly greater emphasis on a home-like atmosphere among those using regulated and unregulated care. The only inter-ethnic difference of consequence was that White and Hispanic parents mentioned the home-like atmosphere somewhat more frequently than Blacks.

The Child's Attitude Towards the Caregiver

Another measure of the parents' overall satisfaction with family day care is how they perceive their child's attitude towards the caregiver. Though this is but one of many aspects of parent satisfaction, it is significant because a child's unhappiness with the caregiver may result in parental dissatisfaction. Though the child's satisfaction, as represented by a positive attitude toward the caregiver, may be a necessary condition for parental satisfaction, it is not a sufficient one. This is because parents may want a good deal more from day care than emotional support for their child, the most plausible underlying cause of a child's positive attitude toward the caregiver.

In Philadelphia and San Antonio, 76% of respondents reported that their child had a loving attitude toward his or her caregiver (Tables 6.45A and 6.45B). Another 22% said their child's attitude was friendly, though not loving. Only 2% considered their child indifferent, and no parents reported that their child disliked his or her caregiver. The majority of parents in Los Angeles reported that their child loved or was friendly with her. Even though only a few parents mentioned emotional support for their child as one of the benefits of family day care, recall that in Los Angeles particularly, 42% of the respondents expressed emotional support as a priority. It is probable that most parents take the need for emotional support for granted.

There were no considerable differences among parents by ethnicity on this characteristic. Parents using regulated and unregulated care tended to report a loving attitude towards caregivers slightly more often than parents using sponsored care, however. This may have been a result of the more structured quality that may be characteristic of sponsored care, and of the greater number of caregivers who were relatives in regulated and unregulated homes. It may also be a function of the duration of the particular arrangements.

Willingness to Recommend the Caregiver to Other Parents

Perhaps the most persuasive measure of overall parent satisfaction is the willingness of parents to recommend their caregivers to others seeking care. This is a very real consideration. Parents in fact consult one another on caregiver availability and satisfaction with their day care arrangements. Parents who are friends may consider each other's recommendations very seriously. Fully 83% of parents in Philadelphia and San Antonio would recommend their caregivers to friends (Tables 6.46A and 6.46B). This is a high proportion and is perhaps the most credible index of parent satisfaction.[4] There was very little difference among parents by ethnicity on this measure, but those using sponsored and regulated care were slightly more likely to recommend a caregiver to a friend than those using unregulated care. Though no particular reason predominated among the parents who were willing to refer their providers, caregiver experience was mentioned by 16%, as was caregiver personality (16%) (Table 6.47). Caregiver skill in teaching children was also mentioned prominently by 15% of the parents, as was caregiver reliability (16%). A number of other reasons, listed in Table 6.47, were also mentioned.

The major reason for not recommending a caregiver was that the caregiver would not take any more children. This was mentioned by 47% of those who would not recommend their caregivers (Table 6.48). Caregiver refusal to take more children than can be well served by available resources in the family day care home is an indication of quality and responsibility.

6.4 Resources to Remedy Deficiencies

Analysis of parental satisfaction requires an assessment of the resources available to parents to remedy the deficiencies they may find in their family day care homes. This element of the analysis is essential to the construction of a more complete picture of this key form of day care in the United States. To say that parents are satisfied or dissatisfied with this or that aspect of their family day care homes without projecting directions that the relationships may take in the future is to render a very limited presentation of the dynamics of parent/caregiver relations.

Basically two options are open to parents who are dissatisfied: they can terminate the relationship and find other care for their child, or they can work with their present caregiver to remedy perceived deficiencies. Mutually satisfactory relationships may last a number of years, enduring until the parent's needs change, the child's needs change (he or she goes to a day care center or to school, for example), or the caregiver ceases rendering day care services. Child care arrangements involving relatives were generally found, in the caregiver component of this study, to endure longer. On the other hand, there is some evidence, presented in Chapter 5.0, that parents will quickly remove their children from day care homes that are fundamentally objectionable to them. The relatively high levels of satisfaction reported in the previous section may be the result of this quick termination by dissatisfied parents.

If the parent elects the other option, and attempts to deal with dissatisfactions by working with the caregiver to improve the level of performance, the availability of social service resources for communication and conflict resolution will likely have a direct effect upon the probability of success.

6.4.1 Parent/Caregiver Relationships

One such potential resource that can facilitate communication about deficiencies and other problems is the existence of a personal relationship between parent and caregiver. It may be useful for the parent and caregiver to have known each other for some time prior to making the child care arrangement under study, although the data show that a majority of parents (63%) knew their caregivers only since care began (Tables 6.49A and 6.49B). Typically, there was no prior relationship, but in most of the remaining cases in Philadelphia and San Antonio (67%) parents and caregivers knew each other at least one year prior to the arrangement. Most of the parents who had this prior relationship were users of regulated or unregulated care. This had been expected, since sponsored care is associated with agencies and other social institutions, while non-sponsored care is more dependent on friendship and kinship networks within the community. Support for this observation was found in the caregiver data which examined the caregivers' community ties and child recruitment practices (Vol. II, AAI, 1980). Also as expected, Black and Hispanic parents were somewhat more likely to have known their caregivers for more than one year prior to the initiation of care. This may be explained in part by the higher incidence of care by a relative among Black and Hispanic parents and, in general, by the more closely maintained friendship and kinship networks within Black and Hispanic lower class communities (Billingsley, 1968).

The parent/caregiver relationship was examined further. Of the 270 parents in the study sample who used non-relative care, fully one-third said they had a close personal friendship with their caregiver; 54% described their relationship as one of casual friendship; and 13% said the relationship was businesslike (Tables 6.50A and 6.50B). Predictably, the closeness of the relationship was inversely related to the degree of regulation, with close personal friendships occurring more frequently among parents using unregulated care (38%) than among those using regulated care (31%) or sponsored care (29%). Moreover, there was considerable interethnic difference, with close personal friendships reported more frequently among Hispanics (42%) than among Blacks (33%) or Whites (26%). Almost all parents in Los Angeles were satisfied with the degree of their communication with their caregiver.

This considerable degree of personal relationship between parents and caregivers may facilitate communication on problems that could otherwise evolve into parental dissatisfactions. Emlen, however, has observed that "arrangements between friends are destined to be fraught with tension" (Emlen, Donoghue, and Clarkson, 1974, p. 290.) The closeness of the relationship may detract from the ability of parent and caregiver to resolve differences. One such situation may arise between parents and caregivers who are relatives, particularly when the caregiver is the mother of the parent. Interviewers in Los Angeles sensed that many parents whose children were cared for by their mothers or mothers-in-law were reluctant to discuss problems with that care. Though arrangements involving relatives typically endure longer than others (as noted in the caregiver study), they may be subject to some tension when communication concerning problems is restricted.

About half of the parents in Philadelphia and San Antonio (51%) said they had asked their caregivers for advice on childrearing (Tables 6.51A and 6.51B). Though there was little difference by ethnicity, parents using unregulated homes tended to seek advice from the caregiver most often, and those using sponsored homes sought advice least often. This tendency suggests that there may be an inverse relationship between the degree of regulation and the openness of the conversation between parent and caregiver, even though, according to the caregiver study component, parents and caregivers generally indicated that good communication between them was desirable. This may be partially attributable to the higher incidence of care by relatives in the non-sponsored home categories. In addition, 84% of respondents said it was important for parents and caregivers to agree on basic childrearing values, with little difference among parents by ethnicity or regulatory status (Tables 6.52A and 6.52B); indeed, 80% of study parents, again with little difference by ethnicity or regulatory status, did agree with their caregivers (Tables 6.53A and 6.53B). The obvious conclusion is that parents generally believed that their caregivers agreed with them on important aspects of childrearing, and they believed this to be important. In affirmation of these beliefs, many of the parents reported seeking advice from caregivers on this subject.

It is informative to further examine data from those parents reporting disagreement with their caregivers on childrearing values.

Eighteen percent, or 41 parents, said their ideas on raising children differed from these of their caregivers. Of these, 85%, or 35 parents, tried to work out their differences, and 69% succeeded. Either caregivers finally accepted the parents' views (51%) or parents came around to the views of the caregivers (17%). Ten parents (29%) reported their differences unresolved. The key area of disagreement cited by the 41 respondents was discipline.

Parents reported that they most often asked their caregivers about the child's behavior during the day, and information in this area from caregivers was most helpful and most important to them.

Finally, 67% of the respondents in Philadelphia and San Antonio said they agreed with their caregivers most of the time. Twenty-six percent reported agreement all the time, and 7% said they agreed sometimes. For 79% of the parents these conversations centered on their children rather than on personal or social issues.

In summation, parent/caregiver relationships may constitute a resource for resolution of parental dissatisfactions, though the picture is not entirely clear. In unregulated and regulated homes, parents seemed to rely on friendship and kinship relations for finding family day care, and parents may have had a friendship with the caregiver which antedated the child care arrangement and which could be used as a resource for the resolution of parental dissatisfaction.

Parents using sponsored care were friends with their caregiver less frequently, but these arrangements often offered other, institutional resources that facilitated communications between parent and caregiver and, presumably, amelioration of parental dissatisfaction. Further investigation to assess these issues would require additional data.

6.5 Parental Attitudes Toward Childrearing

Though not a focal question in this research, the distribution of childrearing attitudes among study parents is of some interest, as it offers potential explanations for patterns in the distribution of other, more central variables.

Respondents in Philadelphia and San Antonio were administered a series of 27 questions adapted from Kohler's Maternal Attitude Scale. These items were scaled continuously so that they could be subjected to forms of statistical analysis based on Pearson's r. Respondents were asked to indicate, for a series of assertions, their agreement or disagreement scaled on five points from "agree strongly" to "disagree strongly." It was anticipated that some differences in childrearing attitudes might appear among parents of different ethnicities. It was considered possible that there might also be differences among parents using sponsored, regulated, and unregulated homes.

This part of the parent component of the National Day Care Home Study could well be subjected to in-depth analysis and of itself constitute a major study. The present analysis seeks only to review basic patterns briefly in order to identify constellations of apparent opinions and predispositions, most notably as they may relate to other aspects of parental preferences considered elsewhere in the analysis. The findings in the section are very tentative. However, in general, the patterns in this sub-section of the parent study, conducted in Philadelphia and San Antonio, conform to the patterns discerned in other data. In particular, an examination of the distributions of the responses reveals two major dimensions in the structure of parental attitudes, an educational dimension and an authoritative one.

6.5.1 Parental Concerns with Education

Both ethnic and regulatory status differences are apparent in these data from San Antonio and Philadelphia. Those parents using sponsored homes seemed more interested in the intellectual development of their children than those using homes of other regulatory types. They were more eager to begin teaching young children at an early age, more interested in having children prepared for school and taught useful intellectual skills, and more likely to believe that teaching young children colors and numbers is important to their later success in school.

Among parents of differing ethnicities, the most general pattern seemed to be that, while White parents were more eager to begin teaching children at an early age, Blacks and Hispanics were more emphatic about education generally. Consistent with this, White parents seemed to believe that young children understand more of what is said to them than Blacks believed they do, and Black parents more than Hispanics. Black and Hispanic parents were more interested in having caregivers prepare young children for school than were Whites. Hispanic parents were more insistent than were Whites about the importance of teaching things that would be useful. Correlative to this, more White than Hispanic parents, and more Hispanic than Black parents, believed that learning music and dance is more fun than learning basic intellectual skills. Moreover, more White and Hispanic parents than Black parents thought it more important to teach young children to share than to know the alphabet.

6.5.2 Authority

The preferences of parents for a free or a controlled environment within the family day care home were related elsewhere in this report. Concern with authority, which is essentially the same phenomenon, is the other major dimension of the data on parental childrearing preferences. A key question in this regard is whether parents believe that the most important thing for young children to learn is to obey adults. Black and Hispanic parents tended to believe this more often than Whites, and parents using sponsored care more often than others. Similarly, parents using sponsored care tended more often to believe in the importance of discussing wrongdoing directly with the child, while Black parents believed so more often than Whites. Black parents and those using sponsored care also felt more strongly than others that the caregiver should plan daily activities. On the related issue of personal cleanliness, Black and Hispanic parents more often believed it important to keep young children clean and neat than did Whites. Blacks and Hispanics, more often than Whites, believed it more important to let children explore than to protect them. On the question of discipline, there was wide variation among parents on whether or not naughty children should be spanked, though at the other end of that spectrum, White parents were less likely to believe that too much parental affection will spoil a young child.

Conclusion: Suggested Ideal-Types

From a first, very preliminary, consideration of these data on childrearing attitudes, there emerge two ideal-typical patterns of childrearing practices. These patterns may be compared with the conceptual frameworks generated by other studies of these phenomena, and may serve as conceptual nodes around which to organize further inquiry. One ideal-type is the home that emphasizes directed learning of intellectual skills in an environment where authority is firm but in which children are encouraged to explore. This seems to summarize the concerns and preferences of Black and Hispanic parents, and of parents of whatever ethnicity using sponsored homes. The other ideal-type is the home in which socialization and sharing are emphasized over intellectual development in an atmosphere of relative freedom, and in which young children are protected more than they are encouraged to explore. This pattern seems to articulate the preferences of White parents as well as parents of whatever ethnicity using regulated and unregulated care. These patterns are consistent with those discovered in other phases of the analysis.

6.5.3 Relationship to Caregivers

As noted above, most parents think it is important to agree with the caregivers about childrearing, although, despite their belief that such agreement exists, most parents may not have detailed knowledge of their caregiver's actual

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childrearing beliefs and practices. This matter may be of considerable interest to parents once they understand that differences may exist between themselves and their caregivers, and should, therefore, be subjected to further analysis in additional, more focused studies.

6.6 Parental Attitudes Toward Aspects of Regulation

One way of viewing parents' childrearing attitudes is through the lens of their attitudes toward the regulation of family day care. In Los Angeles, parents were asked which aspects of family day care they felt should be regulated. More than 90% of respondents said they would like to see caregiver health (95%), aspects of home safety (95%), and/or the numbers of children (93%) regulated in the family day care home (Table 6.54). These preferences are not surprising, as health, safety, and group size are now the most frequently regulated characteristics of family day care. A substantial percentage of parents also felt that child health (88%) and caregiver training (82%) should be regulated. Fewer felt that caregiver experience (73%) and caregiver age (59%) were appropriate for regulation. Only 44% of the respondents in Los Angeles felt caregiver education was appropriate for regulation; 42% said the age mix of children should be regulated.[5]

It should be noted that no predominantly social aspect of family day care was deemed appropriate by the parents for regulation. This may suggest one of two things. Either parents do not believe the social dynamics of family day care to be regulatable, or they do not want these crucial aspects of their child's experience in care to be subjected to regulation. Since the childrearing practices of the caregiver constitute the main internal social dynamic of family day care, parents may want more control over these aspects of day care themselves, without intervention by governmental or other outside authorities. On the other hand, many parents may not be intensely interested in the childrearing practices of their caregivers so long as nothing outlandish takes place, such as episodes of child abuse, and so long as the caregiver is reliable and available when needed.

6.7 Summary

This section is a consolidated review of the findings and presents some speculations concerning parental expectations of and satisfaction with family day care arrangements.

6.7.1 Parental Priorities

- Caregiver reliability was the need most often mentioned.
- The next most prominent need was to have children develop their conceptual and linguistic abilities through the directed efforts of caregivers.
- Also prominently mentioned were the needs to have children well cared-for (the most general level of

concern), and to have emotional support provided to them.

- Other needs mentioned were for socialization, a home-like atmosphere, good discipline, a safe and clean environment, and the learning of physical skills.
- Asked about the special needs of children, parents most frequently said their children needed to be with other children; infant care was the other most prominently featured special need. About two-thirds (67%) of the parents who indicated special needs said these needs were satisfied all of the time; an additional 23% said they were satisfied most of the time.

Location, Physical Characteristics, and Nutrition

- A majority of parents used homes that were more than a few blocks away, with White parents more likely to use a distant home than either Blacks or Hispanics. Parents were generally satisfied with these locations.
- More than 90% of the responding parents were satisfied with the physical characteristics of day care homes, including the amount of space, the lighting, the temperature, and the cleanliness. Despite this general satisfaction, that 10% of parents were dissatisfied

with certain characteristics of their day care environment suggests that parents should be particularly vigilant about these matters when examining homes.

- Nearly 15% of parents relying on caregivers for food for their children were dissatisfied with some aspect of this service. The child's daily eating habits while in care emerged as a major area of concern to parents.

Group Composition

- Group size was important to most parents. Parents were overwhelmingly satisfied on this score, with only 15% saying there were too few children and 5% saying there were too many.
- Most parents (60%) preferred a day care group that included a mix of ages rather than one in which all children were of the same age. Most parents (86%) were satisfied with this aspect of care.

The Caregiver

- Parents preferred experienced caregivers rather than those with appropriate college degrees and little or no experience, when forced to make a choice between two hypothetical providers.

- Parents overwhelmingly believed that their caregivers would be unlikely to leave the children unsupervised.
- One in five parents (20%) said their child had been in an accident while in family day care, either with the current caregiver or with a previous one.
- The overwhelming number of parents said it was important for agreement to exist between themselves and caregivers on matters of child discipline.
- Almost all parents (92%) cited as important the ability and willingness of the caregiver to accommodate them regarding drop-off and pick-up times; 97% said the caregiver's availability to provide care as needed was important. Only 51% of responding parents, however, said their caregivers were always available when needed. Hispanic parents were more likely to report their caregiver available as needed than Black or White parents.
- Most parents said it was important for caregivers not to substitute other caregivers for themselves. But while a such a substitution may in some instances erode the quality of care through the substitution

of a less qualified caregiver, it may also enhance the quality of care by providing coverage when the caregiver is absent for vacation, illness, or other reasons.

- Very few parents (only 4% of Philadelphia and San Antonio respondents) reported their caregiver less reliable than desired, with White and Black parents more likely to indicate a problem than Hispanics.

Activities

- Fifty-eight of the 243 respondents in Philadelphia and San Antonio reported dissatisfaction with their child's activities in day care. More than one-half (52%) of these, or some 12% of the total, said they would prefer more emphasis on the development of the conceptual and linguistic skills of their children, while a further 19% expressed an interest in more emphasis on the development of physical skills.
- Blacks and Hispanics tended to prefer that caregivers direct the child's choices and activities more often than did White respondents.
- Nearly three out of four (71%) parents in Philadelphia and San Antonio preferred a home in which learning, rather than play activities,

was emphasized. Black and Hispanic parents (74% and 93%, respectively) preferred the learning environment more often than did White parents.

- Differences among ethnic groups may reflect the value minorities place on education as a vehicle for upward mobility in this society.

Special Services Provided in the Home

- Parents noted the significant limitations on the special services, such as weekend or overnight care, available from the family day care homes in the study sample. This seems to suggest that family day care, while more flexible than center-based or other more structured forms of care, is not always as flexible as some perceived it to be. Special services that are institutionally oriented, such as family or employment counselling, are apparently more readily available in the environment associated with sponsored homes.

Overall Expectations and Satisfactions

- One-half (51%) of the Philadelphia and San Antonio respondents reported unexpected benefits from family day care.

- One in ten (11%) said they had had a negative experience with family day care.
- Overall, parents felt their children received substantial benefits from family day care. Sixty-two percent of the parents in Philadelphia and San Antonio mentioned the opportunity to socialize with other children.
- Ninety-eight percent of the Philadelphia and San Antonio parents said their child had a loving or friendly attitude toward their caregiver.
- A substantial majority said they would recommend their caregiver to a friend.

6.7.2 Resources to Remedy Deficiencies

Parents having problems with their day care arrangements have a choice: either they can terminate the arrangements and seek other care, or they can work with their current caregiver to ameliorate the difficulties.

The first option was discussed in Chapter 5.0; the probability of success with the second would be related to the availability of resources to assist parents and caregivers, and to those aspects of their relationship which contribute to problem solving and hence stability. These issues were, of course, beyond the scope of this study. However, parents in Philadelphia and San Antonio were observed to interact effectively with their caregiver to resolve conflicts, even though there typically was no prior relationship before care began. Fully one-third of the 270 respondents described their relationshop with their caregiver as close personal friendship; 54% described it as a casual friendship.

- Parents perceived that they and their caregiver had similar childrearing values; this was important to most parents. Only 18% indicated differences, and most were able to resolve these differences satisfactorily, though a substantial percentage (29%) said their differences of view still remained.
- Discipline was a key area of disagreement, and parents asked their provider most often about their child's behavior during the day.
- The majority of parents reported agreement with their caregiver on most things they discussed. These conversations focused on the child in care.

These findings suggest, as Emlen concluded, that "most users and givers of family day care appear to have the social competence to manage the relationships involved and to achieve what they want in an arrangement despite the strains that are also involved" (Emlen, Donoghue, and Clarkson, 1974, p. 289).

6.7.3 Childrearing Attitudes of Parents

In general, the patterns of attitudes discovered conform to patterns discerned in other parts of the data. Two major features emerged in the structure of these attitudes: an educational dimension and an authoritative dimension.

- Though most parents were concerned with the development of their child's conceptual and linguistic skills, Blacks and Hispanics tended to place greater emphasis on this development.
- Black and Hispanic parents seemed to prefer child care homes that emphasize directed learning of intellectual skills in an environment where authority is firm, but in which children are encouraged to explore.
- White parents, on the other hand, more often preferred homes in which socialization and sharing are emphasized over conceptual and linguistic skill development; in their view this socialization and sharing should occur in an atmosphere of relative freedom in which young children are protected more than they are encouraged to explore.

Other Indicators of Parental Attitudes Toward Childrearing Practices

- In a further indication of attitudes toward childrearing practices, parents in Los Angeles expressed some strong feelings that health, home safety, numbers of children, and certain non-social aspects of the day care home are appropriate for regulation. Comparatively few parents thought the programmatic aspects of day care should be regulated.

NOTES

1. Among the most important selection factors for users of family day care in the Unco study were that the caregiver be reliable, that the environment be clean and safe, that the caregiver be "warm and loving," and that the child like the care (Vol. III, Table 4-18).

2. In the Unco study, about one-third of all home users expressed concern about children not being fed properly in group care arrangements. This concern for nutrition was most strongly expressed by Blacks (Vol. III, Table 3-72 and 73).

3. Parents in the Unco survey felt that ratios in family day care homes should be more stringent than in centers (Vol. III, Table 6-32). Most users of unrelated family day care (60%) and centers (91%) felt that ratios should be regulated by the government.

4. Over 90% of the family day care users in the Unco study were "satisfied" or "very satisfied" with their arrangements (Vol. I, Table 5-3).

5. In the Unco study, a majority of unrelated family day care users felt that the following aspects of family day care should be regulated: cleanliness and sanitation, food and nutrition, fire and safety, staff/child ratios, and the health of both staff and children (Vol. III, Table 6-20).

Table 6.1: PARENTAL PRIORITIES FOR CHILD CARE BY REGULATORY STATUS*

PHILADELPHIA AND SAN ANTONIO

N = 233

PARENTAL PRIORITIES	Sponsored	Regulated	Unregulated	TOTAL
Reliable caregiver	17 (26%)	24 (29%)	29 (35%)	70 (29%)
Learning cognitive/ linguistic skills	22 (33%)	19 (23%)	21 (25%)	62 (26%)
Child well cared for	18 (27%)	19 (23%)	19 (23%)	56 (23%)
Good nutrition	11 (17%)	20 (24%)	21 (25%)	52 (21%)
Emotional support	10 (15%)	22 (27%)	18 (21%)	50 (21%)
Home-like atmosphere	15 (23%)	19 (23%)	12 (14%)	46 (19%)
Socialization	13 (20%)	21 (25%)	12 (14%)	46 (19%)
Good discipline	11 (17%)	15 (18%)	17 (20%)	43 (18%)
Safe, clean environment	13 (20%)	14 (17%)	9 (11%)	36 (15%)
Learning physical physical skills	7 (11%)	12 (14%)	11 (13%)	30 (12%)
TOTAL RESPONDENTS	66	83	84	233

*Because multiple responses may occur for each respondent, totals may be greater than the number of usable responses.

Table 6.2: PARENTAL PRIORITIES FOR CHILD CARE BY REGULATORY STATUS*

LOS ANGELES

N = 105

PERCENT MENTIONING

PARENTAL PRIORITIES	Sponsored	Regulated	Unregulated	TOTAL
Emotional support for child	15 (43%)	19 (50%)	10 (31%)	44 (42%)
Safe, clean place for child	7 (20%)	13 (34%)	8 (25%)	28 (27%)
Caregiver is dependable, reliable	2 (6%)	8 (21%)	10 (31%)	20 (19%)
Educational training for child	7 (20%)	4 (11%)	4 (12%)	15 (14%)
Good nutrition	5 (14%)	6 (16%)	4 (12%)	15 (14%)
Suitable, flexible hours	4 (11%)	4 (11%)	6 (19%)	14 (13%)
Good discipline	3 (9%)	3 (8%)	0 (0%)	6 (6%)
Convenient transportation	1 (3%)	1 (3%)	1 (3%)	3 (3%)
Personality compatible	1 (3%)	1 (3%)	0 (0%)	2 (2%)
Provides special services	0 (0%)	0 (0%)	1 (3%)	1 (1%)
Other	3 (9%)	1 (3%)	3 (9%)	7 (7%)
TOTAL RESPONDENTS	35	38	32	N = 105

NOTE: There were 101 initial responses and an additional 54 obtained by a second probe, making a total of 155 responses.

*Because multiple responses may occur for each respondent, totals may be greater than the number of usable responses.

Table 6.3: PARENTAL PRIORITIES FOR CHILD CARE BY ETHNICITY*

PHILADELPHIA AND SAN ANTONIO

N = 234

PARENTAL PRIORITIES	White	Black	Hispanic	TOTAL
Reliable caregiver	35 (34%)	23 (27%)	12 (26%)	70 (30%)
Learning cognitive/ linguistic skills	21 (20%)	22 (26%)	17 (37%)	60 (26%)
Child well cared for	32 (31%)	15 (18%)	9 (20%)	56 (24%)
Good nutrition	18 (17%)	20 (24%)	13 (28%)	51 (22%)
Emotional support	28 (27%)	10 (12%)	10 (22%)	48 (21%)
Home-like atmosphere	26 (25%)	13 (15%)	7 (15%)	46 (20%)
Socialization	22 (21%)	13 (15%)	9 (20%)	44 (19%)
Good discipline	20 (19%)	12 (14%)	10 (22%)	42 (18%)
Safe, clean environment	17 (16%)	13 (15%)	4 (9%)	34 (15%)
Learning physical skills	4 (4%)	9 (11%)	16 (35%)	29 (12%)
TOTAL	104	84	46	N = 234

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* Because multiple responses may occur for each respondent, totals may be greater than the number of usable responses.

Table 6.4: PARENTAL PRIORITIES FOR CHILD CARE BY ETHNICITY

LOS ANGELES

N = 105

NUMBER AND PERCENT MENTIONING (in 2 Probes)

PARENTAL PRIORITIES	Black	Hispanic	White	TOTAL
Emotional support for child	11 (38%)	10 (29%)	23 (56%)	44 (42%)
Safe, clean place for child	7 (24%)	14 (40%)	7 (17%)	28 (27%)
Caregiver dependable reliable	4 (14%)	9 (26%)	7 (17%)	20 (19%)
Educational training for child	6 (21%)	4 (11%)	5 (12%)	15 (14%)
Good nutrition	3 (10%)	11 (31%)	1 (2%)	15 (14%)
Suitable, flexible hours	2 (7%)	2 (6%)	10 (24%)	14 (13%)
Good discipline	1 (3%)	2 (6%)	3 (7%)	6 (6%)
Convenient transportation	2 (7%)	0 (0%)	1 (2%)	3 (3%)
Personality compatible	0 (0%)	1 (3%)	1 (2%)	2 (2%)
Provides special services	0 (0%)	0 (0%)	1 (2%)	1 (*%)
Other	2 (7%)	2 (6%)	3 (7%)	7 (7%)
TOTAL	29	35	41	N = 105

NOTE: There were 101 initial responses and an additional 54 obtained by a second probe, making a total of 155.

*Less than 1%

Table 6.5: SPECIAL NEEDS OF CHILDREN BY REGULATORY STATUS*

PHILADELPHIA AND SAN ANTONIO

N = 243

NEED	Sponsored	Regulated	Unregulated	TOTAL
Be with other children	14 (21%)	27 (31%)	24 (27%)	65 (27%)
Infant care and tending	6 (9%)	13 (15%)	12 (14%)	31 (13%)
Be with other children his/her age	3 (4%)	4 (4%)	11 (12%)	18 (7%)
Medication	5 (7%)	6 (7%)	3 (3%)	14 (6%)
Special diet	3 (4%)	2 (2%)	3 (3%)	8 (3%)
Overactive	2 (3%)	1 (1%)	1 (1%)	4 (2%)
To be fed	2 (3%)	0 (0%)	2 (2%)	4 (2%)
Other emotional problems	0 (0%)	2 (2%)	0 (0%)	2 (1%)
To be toilet trained	0 (0%)	0 (0%)	2 (2%)	2 (17%)
Learning disability	1 (1%)	0 (0%)	0 (0%)	1 (-1%)**
Mental handicap	1 (1%)	0 (0%)	0 (0%)	1 (-1%)**
Aggressive	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Other	1 (1%)	0 (0%)	0 (0%)	1 (-1%)**
TOTAL RESPONDENTS	67	88	88	N = 243

*Because multiple responses may occur for each respondent, totals may be greater than the number of usable responses.

**Less than 1%

Table 6.6: SPECIAL NEEDS OF CHILDREN BY ETHNICITY PHILADELPHIA AND SAN ANTONIO*

N = 235

NEED	White	Black	Hispanic	TOTAL
Be with other children	38 (36%)	15 (18%)	9 (20%)	62 (26%)
Infant care and tending	13 (12%)	6 (7%)	10 (22%)	29 (12%)
Be with other children his/her age	8 (8%)	9 (11%)	0 (0%)	17 (7%)
Medication	6 (6%)	6 (7%)	2 (4%)	14 (6%)
Special diet	4 (4%)	3 (4%)	1 (2%)	8 (3%)
To be fed	1 (1%)	1 (1%)	2 (4%)	4 (2%)
Overactive	2 (2%)	0 (0%)	1 (2%)	3 (1%)
To be toilet trained	0 (0%)	1 (1%)	1 (2%)	2 (1%)
Other emotional problems	2 (2%)	0 (0%)	0 (0%)	2 (1%)
Learning disability	0 (0%)	2 (2%)	0 (0%)	2 (1%)
Mental handicap	0 (0%)	1 (1%)	0 (0%)	1 (**)
Other	0 (0%)	1 (1%)	0 (0%)	1 (**)
Aggressive	0 (0%)	0 (0%)	0 (0%)	0 (0%)
TOTAL RESPONDENTS	105	84	46	N = 235

* Because multiple responses may occur for each repondent, totals may be greater than number of usable responses.

** Less than 1%

Table 6.7A: FREQUENCY WITH WHICH CAREGIVER MET CHILD'S SPECIAL NEEDS BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 101

NEEDS MET	Sponsored	Regulated	Unregulated	TOTAL
All the time	13 (19%) (57%)	32 (47%) (82%)	23 (34%) (59%)	68 (67%)
Most of the time	6 (26%) (26%)	6 (26%) (15%)	11 (48%) (28%)	23 (23%)
Some of the time	3 (50%) (13%)	1 (17%) (3%)	2 (33%) (5%)	6 (6%)
Never	1 (25%) (4%)	0 (0%) (0%)	3 (75%) (8%)	4 (4%)
TOTAL	23 (23%)	39 (39%)	39 (39%)	101

Table 6.7B: FREQUENCY WITH WHICH CAREGIVER MET CHILD'S SPECIAL NEEDS BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 95

NEEDS MET	Black	White	Hispanic	TOTAL
All the time	18 (28%) (60%)	39 (60%) (76%)	8 (12%) (57%)	65 (68%)
Most of the time	6 (27%) (20%)	11 (50%) (22%)	5 (23%) (36%)	22 (23%)
Some of the time	4 (67%) (13%)	1 (17%) (2%)	1 (17%) (7%)	6 (6%)
Never	2 (100%) (7%)	0 (0%) (0%)	0 (0%) (0%)	2 (2%)
TOTAL	30 (30%)	51 (54%)	14 (15%)	95

Table 6.8A: PROXIMITY TO CAREGIVER BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 243

PROXIMITY	Sponsored	Regulated	Unregulated	TOTAL
Same building	0 (0%) (0%)	1 (17%) (1%)	5 (83%) (6%)	6 (2%)
Same block	4 (12%) (6%)	11 (33%) (13%)	18 (55%) (20%)	33 (14%)
Within a few blocks	16 (26%) (24%)	24 (39%) (27%)	22 (36%) (25%)	62 (26%)
More than a few blocks	47 (33%) (70%)	52 (37%) (59%)	43 (30%) (49%)	142 (58%)
TOTAL	67 (28%)	88 (36%)	88 (36%)	243

Table 6.8B: PROXIMITY TO CAREGIVER BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 235

PROXIMITY	White	Black	Hispanic	TOTAL
Same building	2 (33%) (2%)	2 (33%) (2%)	2 (33%) (4%)	6 (3%)
Same block	10 (32%) (10%)	14 (45%) (17%)	7 (23%) (15%)	31 (13%)
Within a few blocks	21 (35%) (20%)	29 (48%) (35%)	10 (17%) (22%)	60 (26%)
More than a few blocks	72 (52%) (69%)	39 (28%) (46%)	27 (20%) (59%)	138 (59%)
TOTAL	105 (45%)	84 (36%)	46 (20%)	235

Table 6.9A: REASONS FOR SATISFACTION WITH CAREGIVER LOCATION BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 245

REASONS	Sponsored	Regulated	Unregulated	TOTAL
Close to home	37 (25%) (58%)	53 (36%) (56%)	56 (38%) (65%)	146 (60%)
Close to employment	10 (28%) (16%)	18 (50%) (19%)	8 (22%) (9%)	36 (15%)
Close to sibling care/school	2 (17%) (3%)	4 (33%) (4%)	6 (50%) (7%)	12 (5%)
Neighborhood qualities	3 (30%) (5%)	3 (30%) (3%)	4 (40%) (5%)	10 (4%)
Accessibility through parent transportation	12 (29%) (19%)	17 (41%) (18%)	12 (29%) (14%)	41 (17%)
TOTAL	64 (26%)	95 (39%)	86 (35%)	245

Table 6.9B: REASONS FOR SATISFACTION WITH CAREGIVER LOCATION BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 236

REASONS	White	Black	Hispanic	TOTAL
Close to home	57 (40%) (48%)	55 (39%) (71%)	30 (21%) (75%)	142 (60%)
Close to employment	23 (66%) (19%)	6 (17%) (8%)	6 (17%) (15%)	35 (15%)
Close to sibling care/school	7 (70%) (6%)	1 (10%) (1%)	2 (20%) (5%)	10 (4%)
Neighborhood qualities	6 (67%) (5%)	3 (33%) (4%)	0 (0%) (0%)	9 (4%)
Accessibility through parent transportation	25 (63%) (21%)	13 (32%) (17%)	2 (5%) (5%)	40 (17%)
TOTAL	118 (50%)	78 (33%)	40 (17%)	236

*Responses may be greater than number of respondents because of multiple responses.

Table 6.10A: SATISFACTION WITH AMOUNT OF SPACE BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 242

TYPE OF HOME	Too Much Space	Enough Space	Too Little Space	TOTAL
Sponsored	1 (2%) (33%)	60 (91%) (27%)	5 (8%) (25%)	66 (27%)
Regulated	1 (1%) (33%)	77 (88%) (35%)	10 (11%) (50%)	88 (36%)
Unregulated	1 (1%) (33%)	82 (93%) (37%)	5 (6%) (25%)	88 (36%)
TOTAL	3 (1%)	219 (91%)	20 (8%)	242

Table 6.10B: SATISFACTION WITH AMOUNT OF SPACE BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N = 234

AMOUNT OF SPACE	White	Black	Hispanic	TOTAL
Too much space	0 (0%) (0%)	1 (33%) (1%)	2 (67%) (4%)	3 (1%)
Enough space	94 (44%) (90%)	78 (37%) (93%)	40 (19%) (87%)	212 (91%)
Too little space	10 (53%) (10%)	5 (26%) (6%)	4 (21%) (9%)	19 (8%)
TOTAL	104 (44%)	84 (36%)	46 (20%)	234

Table 6.11A: SATISFACTION WITH AMOUNT OF LIGHT BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 243

TYPE OF HOME	Right Amount	Not Enough	TOTAL
Sponsored	62 (93%) (28%)	5 (8%) (25%)	67 (28%)
Regulated	82 (93%) (37%)	6 (7%) (30%)	88 (36%)
Unregulated	79 (90%) (35%)	9 (10%) (45%)	88 (36%)
TOTAL	223 (92%)	20 (8%)	243

Table 6.11B: SATISFACTION WITH AMOUNT OF LIGHT BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N = 235

AMOUNT OF LIGHT	White	Black	Hispanic	TOTAL
Right amount	92 (43%) (88%)	81 (38%) (96%)	43 (20%) (94%)	216 (92%)
Not enough	13 (68%) (12%)	3 (16%) (4%)	3 (16%) (6%)	19 (8%)
TOTAL	105 (45%)	84 (36%)	46 (20%)	235

Table 6.12A: SATISFACTION WITH TEMPERATURE BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 243

TYPE OF HOME	Too Warm	Just Right	Too Cold	TOTAL
Sponsored	1 (1%) (7%)	64 (96%) (29%)	2 (3%) (33%)	67 (28%)
Regulated	6 (7%) (43%)	78 (89%) (35%)	4 (5%) (67%)	88 (36%)
Unregulated	7 (8%) (50%)	81 (92%) (36%)	0 (0%) (0%)	88 (36%)
TOTAL	14 (6%)	223 (92%)	6 (2%)	243

Table 6.12B: SATISFACTION WITH TEMPERATURE BY ETHNICITY
PHILADELPHIA AND SAN ANTONIO

N = 235

TEMPERATURE	White	Black	Hispanic	TOTAL
Too warm	9 (69%) (8%)	1 (8%) (1%)	3 (23%) (7%)	13 (6%)
Just right	94 (43%) (90%)	81 (37%) (96%)	43 (20%) (93%)	218 (93%)
Too cold	2 (50%) (2%)	2 (50%) (2%)	0 (0%) (0%)	4 (2%)
TOTAL	105 (45%)	84 (36%)	46 (20%)	235

Table 6.13A: SATISFACTION WITH CLEANLINESS BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 242

TYPE OF	Clean Enough	Could Be Cleaner	Not Clean	TOTAL
Sponsored	62 (94%) (28%)	4 (6%) (21%)	0 (0%) (0%)	66 (27%)
Regulated	80 (91%) (36%)	7 (8%) (37%)	1 (1%) (50%)	88 (36%)
Unregulated	79 (90%) (36%)	8 (9%) (42%)	1 (1%) (50%)	88 (36%)
TOTAL	221 (91%)	19 (8%)	2 (1%)	242

Table 6.13B: SATISFACTION WITH CLEANLINESS BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N = 234

CLEANLINESS	White	Black	Hispanic	TOTAL
Clean enough	93 (44%) (89%)	80 (38%) (95%)	40 (19%) (88%)	213 (91%)
Could be cleaner	10 (53%) (10%)	4 (21%) (5%)	5 (26%) (11%)	19 (8%)
Not clean	2 (100%) (2%)	0 (0%) (0%)	0 (0%) (0%)	2 (1%)
TOTAL	105 (45%)	84 (36%)	45 (19%)	234

Table 6.14A: SATISFACTION WITH FOOD SERVED BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 172

QUALITY OF FOOD	Sponsored	Regulated	Unregulated	TOTAL
Caregiver serves some undesirable foods	10 (40%) (18%)	5 (20%) (8%)	10 (40%) (18%)	25 (15%)
Caregiver does not serve undesirable foods	45 (31%) (82%)	56 (38%) (92%)	46 (31%) (82%)	147 (86%)
TOTAL	55 (32%)	61 (35%)	56 (33%)	172

Table 6.14B: SATISFACTION WITH FOOD SERVED BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N = 165

QUALITY OF FOOD	White	Black	Hispanic	TOTAL
Caregiver serves some undesirable foods	13 (54%) (18%)	9 (38%) (14%)	2 (8%) (7%)	24 (14%)
Caregiver does not serve undesirable foods	60 (43%) (82%)	54 (38%) (86%)	27 (19%) (93%)	141 (86%)
TOTAL	73 (44%)	63 (38%)	29 (18%)	165

Table 6.15A: IMPORTANCE OF GROUP SIZE BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 242

GROUP SIZE	Sponsored	Regulated	Unregulated	TOTAL
Very important	43 (31%) (64%)	46 (34%) (52%)	48 (35%) (55%)	137 (57%)
Of some important	22 (24%) (33%)	37 (41%) (42%)	32 (35%) (37%)	91 (38%)
Not important	2 (14%) (3%)	5 (36%) (6%)	7 (50%) (8%)	14 (6%)
TOTAL	67 (28%)	88 (36%)	87 (36%)	242

Table 6.15B: IMPORTANCE OF GROUP SIZE BY ETHNICITY
PHILADELPHIA AND SAN ANTONIO

N = 234

GROUP SIZE	White	Black	Hispanic	TOTAL
Very important	62 (47%) (59%)	44 (33%) (52%)	26 (20%) (58%)	132 (56%)
Of some importance	36 (40%) (34%)	34 (38%) (41%)	19 (21%) (42%)	89 (38%)
Not important	7 (54%) (7%)	6 (46%) (7%)	0 (0%) (0%)	13 (6%)
TOTAL	105 (45%)	84 (36%)	45 (19%)	234

Table 6.16: SATISFACTION WITH NUMBER OF CHILDREN BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 238

TYPE OF HOME	Too Many	Right Number	Not Enough	TOTAL
Sponsored	2 (3%) (18%)	57 (85%) (30%)	8 (12%) (23%)	67 (28%)
Regulated	6 (7%) (55%)	72 (84%) (37%)	8 (9%) (23%)	86 (36%)
Unregulated	3 (4%) (27%)	63 (74%) (33%)	19 (22%) (54%)	85 (36%)
TOTAL	11 (5%)	192 (81%)	35 (15%)	238

Table 6.17A: CHOICE: CHILDREN SAME AGE AS TARGET CHILD VS. AGE MIX BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 242

TYPE OF HOME	Same Age	No Preference	Age Mix	TOTAL
Sponsored	21 (31%) (25%)	5 (8%) (46%)	41 (61%) (28%)	67 (28%)
Regulated	25 (29%) (29%)	5 (6%) (46%)	57 (65%) (39%)	87 (36%)
Unregulated	39 (44%) (46%)	1 (1%) (9%)	48 (55%) (33%)	88 (36%)
TOTAL	85 (35%)	11 (5%)	146 (60%)	242

Table 6.17B: CHOICE: CHILDREN SAME AGE AS TARGET CHILD VS. AGE MIX BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 234

ETHNICITY	Same Age	No Preference	Age Mix	TOTAL
White	28 (27%) (34%)	5 (5%) (45%)	71 (68%) (50%)	104 (44%)
Black	29 (34%) (35%)	6 (7%) (55%)	49 (58%) (35%)	84 (36%)
Hispanic	25 (54%) (30%)	0 (0%) (0%)	21 (46%) (15%)	46 (20%)
TOTAL	82 (35%)	11 (5%)	141 (60%)	234

Table 6.18: SATISFACTION WITH AGE MIX BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 232

TYPE OF HOME	Too Old	Right Age	Too Young	Both Too Young and Old	TOTAL
Sponsored	1 (2%) (13%)	54 (84%) (27%)	9 (14%) (41%)	0 (0%) (0%)	64 (28%)
Regulated	1 (1%) (13%)	78 (89%) (39%)	7 (8%) (32%)	2 (2%) (67%)	88 (38%)
Unregulated	6 (8%) (75%)	67 (84%) (34%)	6 (8%) (27%)	1 (1%) (33%)	80 (34%)
TOTAL	8 (3%)	199 (86%)	22 (9%)	3 (1%)	232

Table 6.19: PARENTAL PREFERENCE REGARDING AGE MIX BY REGULATORY STATUS
LOS ANGELES

N = 105

PREFERENCE	Sponsored	Regulated	Unregulated	TOTAL
Same age as child	11 (28%) (31%)	12 (30%) (32%)	17 (42%) (53%)	40 (38%)
Older children	5 (56%) (14%)	4 (44%) (10%)	0 (0%) (0%)	9 (9%)
Mix of ages	11 (26%) (31%)	19 (45%) (50%)	12 (29%) (38%)	42 (40%)
No preferences	8 (57%) (23%)	3 (21%) (8%)	3 (21%) (9%)	14 (13%)
TOTAL	35 (33%)	38 (36%)	32 (30%)	105

Table 6.20A: CHOICE: CAREGIVER WITH EDUCATION/NO EXPERIENCE VS. CAREGIVER WITH LESS EDUCATION/MORE EXPERIENCE BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 238

TYPE OF HOME	Education No Experience	No Preference	Less Education More Experience	TOTAL
Sponsored	9 (13%) (27%)	3 (5%) (33%)	55 (82%) (28%)	67 (28%)
Regulated	13 (15%) (38%)	1 (1%) (11%)	72 (84%) (37%)	86 (36%)
Unregulated	12 (14%) (35%)	5 (6%) (56%)	68 (80%) (35%)	85 (36%)
TOTAL	34 (14%)	9 (4%)	195 (82%)	238

Table 6.20B: CHOICE: CAREGIVER WITH EDUCATION/NO EXPERIENCE VS. CAREGIVER WITH LESS EDUCATION/MORE EXPERIENCE BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 230

ETHNICITY	Education No Experience	No Preference	Less Education More Experience	TOTAL
White	18 (18%) (56%)	3 (3%) (33%)	80 (79%) (42%)	101 (44%)
Black	12 (14%) (38%)	4 (5%) (45%)	67 (81%) (35%)	83 (36%)
Hispanic	2 (4%) (6%)	2 (4%) (22%)	42 (91%) (22%)	46 (20%)
TOTAL	32 (14%)	9 (4%)	189 (82%)	230

Table 6.21A: PARENTAL PERCEPTION OF LIKELIHOOD OF CAREGIVER
LEAVING CHILD UNSUPERVISED
BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 242

LIKELIHOOD	Sponsored	Regulated	Unregulated	TOTAL
Very likely	1 (25%) (2%)	2 (50%) (2%)	1 (25%) (1%)	4 (2%)
Somewhat likely	2 (17%) (3%)	4 (33%) (5%)	6 (50%) (7%)	12 (5%)
Not likely	63 (28%) (95%)	82 (36%) (93%)	81 (36%) (92%)	226 (93%)
TOTAL	66 (27%)	88 (36%)	88 (36%)	242

Table 6.21B: PARENTAL PERCEPTION OF LIKELIHOOD OF CAREGIVER
LEAVING CHILD UNSUPERVISED
BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 234

LIKELIHOOD	White	Black	Hispanic	TOTAL
Very likely	3 (75%) (3%)	0 (0%) (0%)	1 (25%) (2%)	4 (2%)
Somewhat likely	6 (50%) (6%)	5 (42%) (6%)	1 (8%) (2%)	12 (5%)
Not likely	96 (44%) (91%)	78 (36%) (94%)	44 (20%) (96%)	218 (93%)
TOTAL	105 (45%)	83 (35%)	46 (20%)	234

Table 6.22A: SATISFACTION WITH AMOUNT OF SUPERVISION BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 241

TYPE OF HOME	Too Much	Enough	Not Enough	TOTAL
Sponsored	0 (0%) (0%)	63 (96%) (27%)	3 (5%) (5%)	66 (30%)
Regulated	0 (0%) (0%)	84 (96%) (37%)	4 (5%) (40%)	88 (37%)
Unregulated	1 (1%) (100%)	83 (95%) (36%)	3 (3%) (30%)	87 (36%)
TOTAL	1 (*)	230 (95%)	10 (4%)	241

Table 6.22B: SATISFACTION WITH AMOUNT OF SUPERVISION BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N = 233

AMOUNT	White	Black	Hispanic	TOTAL
Too much	0 (0%) (0%)	1 (100%) (1%)	0 (0%) (0%)	1 (*)
Enough	100 (45%) (96%)	81 (36%) (96%)	41 (18%) (91%)	222 (95%)
Not enough	4 (40%) (4%)	2 (20%) (2%)	4 (40%) (9%)	10 (4%)
TOTAL	104 (45%)	84 (36%)	45 (19%)	233

* Less than 1%

Table 6.23A: CHILDREN IN ACCIDENTS BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 242

ACCIDENTS	Sponsored	Regulated	Unregulated	TOTAL
Accident with current caregiver	10 (28%) (15%)	8 (22%) (9%)	18 (50%) (20%)	36 (15%)
Accident with a previous caregiver	3 (25%) (4%)	2 (17%) (2%)	7 (58%) (8%)	12 (5%)
No accidents	53 (27%) (80%)	78 (40%) (89%)	63 (32%) (72%)	194 (80%)
TOTAL	66 (27%)	88 (36%)	88 (36%)	242

Table 6.23B: CHILDREN IN ACCIDENTS BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N=234

ACCIDENTS	White	Black	Hispanic	TOTAL
Accident with current caregiver	18 (50%) (17%)	14 (39%) (17%)	4 (11%) (9%)	36 (15%)
Accident with a previous caregiver	7 (64%) (7%)	1 (9%) (1%)	3 (27%) (6%)	11 (5%)
No accident	79 (42%) (76%)	69 (37%) (82%)	39 (21%) (85%)	187 (80%)
TOTAL	104 (44%)	84 (36%)	46 (20%)	234

Table 6.24A: IMPORTANCE THAT CAREGIVER DISCIPLINE THE SAME WAY AS PARENTS BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 242

IMPORTANCE	Sponsored	Regulated	Unregulated	TOTAL
Very important	51 (26%) (77%)	71 (36%) (81%)	76 (38%) (86%)	198 (82%)
Of some importance	12 (30%) (18%)	17 (42%) (19%)	11 (28%) (12%)	40 (17%)
Not important	3 (75%) (5%)	0 (0%) (0%)	1 (25%) (1%)	4 (2%)
TOTAL	66 (27%)	88 (36%)	88 (36%)	242

Table 6.24B: IMPORTANCE THAT CAREGIVER DISCIPLINE THE SAME WAY AS PARENTS BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 234

IMPORTANCE	White	Black	Hispanic	TOTAL
Very important	84 (44%) (81%)	66 (35%) (79%)	40 (21%) (87%)	190 (81%)
Of some importance	18 (45%) (17%)	16 (40%) (19%)	6 (15%) (13%)	40 (17%)
Not important	2 (50%) (2%)	2 (2%)	0 (0%) (0%)	4 (2%)
TOTAL	104 (44%)	84 (36%)	46 (20%)	234

Table 6.25A: IMPORTANCE OF CONVENIENT DROP OFF AND PICK UP TIME BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 242

IMPORTANCE	Sponsored	Regulated	Unregulated	TOTAL
Very important	65 (29%) (97%)	79 (36%) (90%)	78 (35%) (90%)	222 (92%)
Of some importance	2 (11%) (3%)	9 (47%) (10%)	8 (42%) (9%)	19 (8%)
Not important	0 (0%) (0%)	0 (0%) (0%)	1 (100%) (1%)	1 (*)
TOTAL	67 (28%)	88 (36%)	87 (36%)	242

Table 6.25B: IMPORTANCE OF CONVENIENT DROP OFF AND PICK UP TIME BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 234

IMPORTANCE	White	Black	Hispanic	TOTAL
Very important	95 (44%) (91%)	77 (36%) (92%)	42 (20%) (91%)	214 (91%)
Of some importance	8 (42%) (8%)	7 (37%) (8%)	4 (21%) (9%)	19 (8%)
Not important	1 (100%) (1%)	0 (0%) (0%)	0 (0%) (0%)	1 (*)
TOTAL	104 (44%)	84 (36%)	46 (20%)	234

* Less than 1%

Table 6.26A: IMPORTANCE OF CAREGIVER AVAILABILITY WHEN NEEDED BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 235

IMPORTANCE	Sponsored	Regulated	Unregulated	TOTAL
Very important	61 (30%) (91%)	74 (36%) (84%)	72 (35%) (82%)	207 (85%)
Of some importance	5 (18%) (7%)	10 (36%) (11%)	13 (46%) (15%)	28 (12%)
Not important	1 (12%) (2%)	4 (50%) (5%)	3 (38%) (3%)	8 (3%)
TOTAL	67 (28%)	88 (36%)	88 (36%)	243

Table 6.26B: IMPORTANCE OF CAREGIVER AVAILABILITY WHEN NEEDED BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 235

IMPORTANCE	White	Black	Hispanic	TOTAL
Very important	93 (47%) (89%)	68 (34%) (81%)	38 (19%) (83%)	199 (85%)
Of some importance	8 (29%) (8%)	15 (54%) (18%)	5 (18%) (11%)	28 (12%)
Not important	4 (50%) (4%)	1 (12%) (1%)	3 (38%) (6%)	8 (3%)
TOTAL	105 (45%)	84 (36%)	46 (19%)	235

Table 6.27A: IMPORTANCE OF CAREGIVER NOT SUBSTITUTING ANOTHER CAREGIVER
BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 243

IMPORTANCE	Sponsored	Regulated	Unregulated	TOTAL
Very important	44 (25%) (66%)	64 (36%) (73%)	69 (39%) (78%)	177 (73%)
Of some importance	20 (36%) (30%)	19 (35%) (21%)	16 (29%) (18%)	55 (23%)
Not important	3 (27%) (4%)	5 (46%) (6%)	3 (27%) (3%)	11 (4%)
TOTAL	67 (28%)	88 (36%)	88 (36%)	243

Table 6.27B: IMPORTANCE OF CAREGIVER NOT SUBSTITUTING ANOTHER CAREGIVER
BY ETHNICITY
PHILADELPHIA AND SAN ANTONIO

N = 235

IMPORTANCE	White	Black	Hispanic	TOTAL
Very important	77 (45%) (73%)	59 (35%) (70%)	33 (20%) (72%)	169 (72%)
Of some importance	25 (46%) (24%)	20 (36%) (24%)	10 (18%) (22%)	55 (23%)
Not important	3 (27%) (3%)	5 (46%) (6%)	3 (27%) (6%)	11 (5%)
TOTAL	105 (45%)	84 (36%)	46 (19%)	235

Table 6.28A: CAREGIVER AVAILABILITY BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 235

AVAILABILITY	Sponsored	Regulated	Unregulated	TOTAL
Caregiver sometimes unavailable	43 (37%) (65%)	34 (29%) (40%)	39 (34%) (46%)	116 (49%)
Caregiver always available	23 (19%) (35%)	50 (42%) (60%)	46 (39%) (54%)	119 (51%)
TOTAL	66 (28%)	84 (36%)	85 (36%)	235

Table 6.28B: CAREGIVER AVAILABILITY BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 234

AVAILABILITY	White	Black	Hispanic	TOTAL
Caregiver sometimes unavailable	55 (47%) (52%)	46 (40%) (55%)	15 (13%) (33%)	116 (50%)
Caregiver always available	50 (42%) (48%)	38 (32%) (45%)	30 (25%) (67%)	118 (50%)
TOTAL	105 (45%)	84 (36%)	45 (19%)	234

Table 6.29A: CAREGIVER UNAVAILABILITY BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 82

AVAILABILITY AS A PROBLEM	Sponsored	Regulated	Unregulated	TOTAL
Caregiver availability is a problem	11 (55%) (28%)	3 (15%) (16%)	6 (30%) (25%)	20 (24%)
Caregiver availability not a problem	28 (45%) (72%)	16 (26%) (84%)	18 (29%) (75%)	62 (76%)
TOTAL	39 (48%)	19 (23%)	24 (29%)	82

Table 6.29B: CAREGIVER UNAVAILABILITY BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N = 82

AVAILABILITY AS A PROBLEM	White	Black	Hispanic	TOTAL
Caregiver availability is a problem	9 (45%) (26%)	9 (45%) (25%)	2 (10%) (18%)	20 (24%)
Caregiver availability is not a problem	26 (42%) (74%)	27 (44%) (75%)	9 (15%) (82%)	62 (76%)
TOTAL	35 (43%)	36 (44%)	11 (13%)	82

Table 6.30A: SATISFACTION WITH DAILY ACTIVITIES BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 236

TYPE OF HOME	Not Satisfactory	Satisfactory But Could Be Improved	Satisfactory	TOTAL
Sponsored	0 (0%) (0%)	17 (27%) (25%)	47 (73%) (28%)	64 (27%)
Regulated	1 (1%) (100%)	28 (32%) (41%)	58 (67%) (35%)	87 (37%)
Unregulated	0 (0%) (0%)	23 (27%) (34%)	62 (73%) (37%)	85 (36%)
TOTAL	1 (*)	68 (29%)	167 (71%)	236

*Less than 1%

Table 6.30B: SATISFACTION WITH DAILY ACTIVITIES BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N = 229

SATISFACTION	White	Black	Hispanic	TOTAL
Not Satisfactory	0 (0%) (0%)	0 (0%) (0%)	0 (0%) (0%)	0 (0%) (0%)
Satisfactory but could be improved	25 (38%) (24%)	26 (39%) (32%)	15 (23%) (34%)	66 (29%)
Satisfactory	78 (48%) (76%)	56 (34%) (68%)	29 (18%) (66%)	163 (71%)
TOTAL	103 (45%)	82 (36%)	44 (19%)	229

Table 6.31: ACTIVITIES PARENTS PREFERRED FOR THEIR CHILDREN PHILADELPHIA AND SAN ANTONIO

(ONLY PARENTS DISSATISFIED WITH ACTIVITIES)

ACTIVITIES	Frequency	Percent of Dissatisfied Parents N = 58	Percent of Philadelphia and San Antonio Parents N = 243
Social Activities	3	5%	1%
Physical Skills and abilities	11	19%	5%
Conceptual/ Linguistic Skills	30	52%	12%
Other	4	7%	2%
Combination	10	17%	4%
TOTAL	58	100%	100%

Table 6.32A: CHOICE: DIRECTION OF LEARNING ACTIVITIES VS. FREEDOM OF CHOICE BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 243

TYPE OF HOME	Caregiver Offering Direction	Caregiver Offering Freedom of Choice	TOTAL
Sponsored	37 (55%) (39%)	30 (44%) (20%)	67 (28%)
Regulated	26 (29%) (27%)	62 (70%) (42%)	88 (36%)
Unregulated	33 (38%) (34%)	55 (62%) (37%)	88 (36%)
TOTAL	96 (40%)	147 (61%)	243

Table 6.32B: CHOICE: DIRECTION OF LEARNING ACTIVITIES VS. FREEDOM OF CHOICE BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 235

ETHNICITY	Caregiver Offering Direction	Caregiver Offering Freedom of Choice	TOTAL
White	31 (30%) (33%)	74 (70%) 52%)	105 (45%)
Black	40 (48%) (43%)	44 (52%) (31%)	84 (36%)
Hispanic	22 (48%) (24%)	24 (52%) (17%)	46 (20%)
TOTAL	93 (40%)	142 (60%)	235

Table 6.33A: CHOICE: PLAY VS. LEARNING ACTIVITIES BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 238

TYPE OF HOME	Caregiver Offering Play	No Preference	Caregiver Offering Learning	TOTAL
Sponsored	14 (21%) (24%)	2 (3%) (17%)	50 (76%) (30%)	66 (28%)
Regulated	27 (32%) (47%)	3 (4%) (25%)	55 (65%) (33%)	85 (36%)
Unregulated	17 (20%) (29%)	7 (8%) (58%)	63 (72%) (38%)	87 (36%)
TOTAL	58 (24%)	12 (5%)	168 (71%)	238

Table 6.33B: CHOICE: PLAY VS. LEARNING ACTIVITIES BY ETHNICITY
PHILADELPHIA AND SAN ANTONIO

N = 231

ETHNICITY	Caregiver Offering Play	No Preference	Caregiver Offering Learning	TOTAL
White	34 (33%) (60%)	6 (6%) (50%)	63 (61%) (39%)	103 (45%)
Black	16 (20%) (28%)	5 (6%) (42%)	61 (74%) (38%)	82 (36%)
Hispanic	7 (15%) (12%)	1 (2%) (8%)	38 (83%) (23%)	46 (20%)
TOTAL	57 (25%)	12 (5%)	162 (70%)	231

*Less than 1%

Table 6.34: AVAILABILITY AND USES OF SPECIAL SERVICES
LOS ANGELES

N = 105

SPECIAL SERVICES	Service Unavailable		Availability of Service Unknown by Respondent		Service Available		Service Used	
	Frequency	Percent	Frequency	Percent	Frequency	Percent	Frequency*	Percent
Care for Seriously Ill Child	57	54%	18	17%	28	27%	20	71%
Evening Care	46	44%	11	11%	47	45%	33	70%
Overnight care	57	54%	18	17%	30	29%	15	50%
Weekend Care	52	50%	15	14%	36	34%	23	64%
Escorts Child to Medical Appointments	79	75%	8	8%	15	14%	10	67%
Caregiver Provides Transportation	85	81%	3	3%	17	16%	8	47%

*Relative to cases in which service was reported to be available

Table 6.35: SPECIAL SERVICES

PHILADELPHIA AND SAN ANTONIO

N = 243

SPECIAL SERVICES	Service Provided	Service Used*	Pleased With Service**
Care for mildy sick child	207 (85%)	190 (92%)	188 (99%)
Care for seriously sick child	46 (19%)	32 (70%)	33 (100%)
Evening care	37 (15%)	34 (92%)	34 (100%)
Weekend Care	39 (16%)	35 (90%)	34 (97%)
Transportation	12 (5%)	12 (100%)	12 (100%)
Take child to medical	21 (9%)	19 (90%)	19 (100%)
Provide diapers	4 (2%)	3 (75%)	3 (100%)

*Percentages based on numbers of cases where services were provided.
**Percentages based on numbers of cases where services were used.

Table 6.36: AVAILABILITY AND USE OF SPECIAL SERVICES FOR PARENTS USING SPONSORED HOMES

LOS ANGELES

N = 35

SPECIAL SERVICES	Service Available	Service Used
Health Service	2	1
Social Work	3	1
Parent Education	3	1
Family Counseling	1	1
Transportation	1	1
Other	3	2

Table 6.37: AVAILABILITY AND USE OF SPECIAL SERVICES FOR PARENTS USING SPONSORED HOMES

PHILADELPHIA AND SAN ANTONIO

N = 67

SPECIAL SERVICES	Service Available	Service Used	Service Helpful	Need Service
Health services	13	10	10	25
Family planning services	9	2	2	13
Housing services	7	2	2	23
Financial help	30	27	26	19
Free stamps or free food	18	15	13	23
Job training	9	4	2	27
Employment service	12	6	4	26
Educational services	24	11	9	20
Recreational services	21	11	8	22
Services for the handicapped	9	0	0	17
Parent Education	21	3	2	16
Help with finding day care	66	61	54	2
Help with communicating with caregiver	47	24	22	6
Individual counselling	27	11	9	12
Family counselling	22	3	2	15

Table 6.38A: UNEXPECTED BENEFITS BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 241

UNEXPECTED BENEFITS	Sponsored	Regulated	Unregulated	TOTAL
Yes, receiving unexpected benefits	32 (26%) (48%)	48 (39%) (55%)	43 (35%) (49%)	123 (51%)
No, not receiving unexpected benefits	35 (30%) (52%)	39 (33%) (45%)	44 (37%) (51%)	118 (49%)
TOTAL	67 (28%)	87 (36%)	87 (36%)	241

Table 6.38B: UNEXPECTED BENEFITS BY ETHNICITY
PHILADELPHIA AND SAN ANTONIO

N = 233

UNEXPECTED BENEFITS	White	Black	Hispanic	TOTAL
Yes, receiving unexpected benefits	59 (50%) (56%)	33 (28%) (40%)	27 (23%) (59%)	119 (51%)
No, not receiving unexpected benefits	46 (40%) (44%)	49 (43%) (60%)	19 (17%) (41%)	114 (49%)
TOTAL	105 (45%)	82 (35%)	46 (20%)	233

Table 6.39: NATURE OF UNEXPECTED BENEFITS*
(Only for parents receiving unexpected benefits)

PHILADELPHIA AND SAN ANTONIO

		N = 118	N = 243
NATURE OF EXPECTED BENEFITS	Number	Percent of Parents Receiving Unexpected Benefits	Percent of Philadelphia and San Antonio Parents
Learning physical skills	8	7	3%%
Learning conceptual/ linguistic skills	6	5	2%%
Caregiver personality exceptionally attractive to children	11	9	5%%
Much individual attention	56	17%	23%
Good nutrition	9	8%	4%
Food at no cost	8	7%	3%
Flexibility on hours	3	3%	1%
Socialization	5	4%	2%
Other	12	10%	5%
TOTAL	118	100%	100%

* Total may be greater than number of respondents because multiple responses were permitted.

Table 6.40A: UNMET EXPECTATIONS OF FAMILY DAY CARE BY REGULATORY STATUS*

(Only parents with unmet expectations)

PHILADELPHIA AND SAN ANTONIO

N = 243

UNMET EXPECTATIONS	Sponsored	Regulated	Unregulated
Better cleanliness	0	1	1
More teaching	2	1	1
Adequate food (including no skipped meals if asleep)	0	2	1
Other	3	1	0

* No totals and percentages were computed because N is too small to be meaningful.

Table 6.40B: UNMET EXPECTATIONS OF FAMILY DAY CARE BY ETHNICITY*

(Only parents with unmet expectations)

PHILADELPHIA AND SAN ANTONIO

N = 243

UNMET EXPECTATIONS	White	Black	Hispanic
Better cleanliness	0	1	0
More teaching	2	1	1
Adequate food (including no skipped meals if asleep)	2	1	0
Other	2	1	0

* No totals and percentages were computed because N is too small to be meaningful.

Table 6.41A: FACTORS VIEWED AS INADEQUATE BY REGULATORY STATUS*
PHILADELPHIA AND SAN ANTONIO

N = 243

FACTORS VIEWED AS INADEQUATE	Sponsored	Regulated	Unregulated	TOTAL
Learning conceptual/ linguistic skills	9 (13%)	22 (25%)	13 (15%)	44 (18%)
Learning physical skills	3 (4%)	8 (9%)	8 (9%)	19 (8%)
Socialization	3 (4%)	4 (5%)	9 (10%)	16 (7%)
Good discipline	2 (3%)	2 (2%)	2 (2%)	6 (2%)
Good supervision	1 (1%)	2 (2%)	2 (2%)	5 (2%)
Home like atmosphere	1 (1%)	0 (0%)	1 (1%)	2 (1%)
Safe/clean environment	1 (1%)	0 (0%)	0 (0%)	1 (**)
Emotional support	1 (1%)	0 (0%)	0 (0%)	1 (**)
Dependable, reliable caregiver	1 (1%)	0 (0%)	0 (0%)	1 (**)
Good nutrition	0 (0%)	1 (1%)	0 (0%)	1 (**)
TOTAL RESPONDENTS	67	88	88	N = 243

*Multiple responses permitted

**Less than 1%

Table 6.41B: FACTORS VIEWED AS INADEQUATE BY ETHNICITY*
PHILADELPHIA AND SAN ANTONIO

N = 234

FACTORS VIEWED AS INADEQUATE	White	Black	Hispanic	TOTAL
Learning conceptual/ linguistic skills	13 (12%)	15 (18%)	13 (28%)	41 (18%)
Learning physical skills	5 (5%)	4 (5%)	7 (15%)	16 (7%)
Socialization	4 (4%)	7 (8%)	4 (9%)	15 (6%)
Good discipline	3 (3%)	2 (2%)	1 (2%)	6 (3%)
Good supervision	2 (2%)	2 (2%)	1 (2%)	5 (2%)
Home like atmosphere	1 (1%)	0 (0%)	1 (2%)	2 (1%)
Safe/clean environment	0 (0%)	0 (0%)	1 (2%)	1 (**)
Emotional support	0 (0%)	1 (1%)	0 (0%)	1 (**)
Dependable, reliable caregiver	1 (1%)	0 (0%)	0 (0%)	1 (**)
Good nutrition	1 (1%)	0 (0%)	0 (0%)	1 (**)
TOTAL	105	84	46	N = 234

*Multiple responses permitted

**Less than 1%

Table 6.42A: CHILD'S NEGATIVE EXPERIENCES BY REGULATORY STATUS PHILADELPHIA AND SAN ANTONIO

N = 241

INCIDENCE OF NEGATIVE EXPERIENCE	Sponsored	Regulated	Unregulated	TOTAL
Yes, child has had a negative experience	9 (35%) (14%)	9 (35%) (10%)	8 (31%) (9%)	26 (11%)
No, child has not had a negative experience	57 (26%) (86%)	79 (37%) (90%)	79 (37%) (91%)	215 (89%)
TOTAL	66 (27%)	88 (37%)	87 (36%)	241

Table 6.42B: CHILD'S NEGATIVE EXPERIENCES BY ETHNICITY PHILADELPHIA AND SAN ANTONIO

N = 234

INCIDENCE OF NEGATIVE EXPERIENCE	White	Black	Hispanic	TOTAL
Yes, child has had a negative experience	17 (65%) (16%)	7 (27%) (8%)	2 (8%) (4%)	26 (11%)
No, child has not had a negative experience	88 (42%) (84%)	76 (36%) (92%)	44 (21%) (96%)	208 (89%)
TOTAL	105 (45%)	83 (35%)	46 (20%)	234

Table 6.43: NATURE OF NEGATIVE EXPERIENCES*
(Only for parents whose children had a negative experience)

PHILADELPHIA AND SAN ANTONIO

NATURE OF NEGATIVE EXPERIENCE	Number	N = 36 Percent of Parents Having a Negative Experience	N = 243 Percent Philadelphia and San Antonio Parents
Inappropriate discipline	3	8%	1%
Inadequate supervision	7	19%	3%
Unattended child	5	14%	2%
Physically abused	5	14%	25
Emotionally abused	3	8%	1%
Injured	8	22%	3%
Safety hazard	2	6%	1%
Other	3	8%	5%
TOTAL	36	100%	100%

* Number of responses may be greater than number of respondents, because multiple responses were permitted.

Table 6.44A: BENEFITS TO THE CHILD FROM FAMILY DAY CARE BY REGULATORY STATUS*

PHILADELPHIA AND SAN ANTONIO

N = 243

BENEFITS	Sponsored	Regulated	Unregulated	TOTAL
Socialization	48 (72%)	62 (70%)	40 (45%)	150 (62%)
Learning conceptual/ linguistic skills	34 (51%)	25 (28%)	22 (25%)	81 (33%)
Home like atmosphere	7 (10%)	20 (23%)	26 (30%)	53 (22%)
Emotional support	10 (15%)	17 (19%)	19 (22%)	46 (19%)
Learning physical skills	7 (10%)	12 (14%)	9 (10%)	28 (12%)
Good discipline	6 (9%)	8 (9%)	12 (14%)	26 (11%)
Good supervision	6 (9%)	10 (11%)	8 (9%)	24 (10%)
Good nutrition	4 (6%)	5 (6%)	6 (7%)	15 (6%)
Dependable, reliable caregiver	3 (4%)	2 (2%)	3 (3%)	8 (3%)
Safe/clean environment	0 (0%)	2 (2%)	0 (0%)	2 (1%)
TOTAL RESPONDENTS	67	88	88	N = 243

* Multiple responses were permitted.

Table 6.44B: BENEFITS TO THE CHILD FROM FAMILY DAY CARE BY ETHNICITY*
PHILADELPHIA AND SAN ANTONIO

N = 243

BENEFITS	White	Black	Hispanic	TOTAL
Socialization	71 (68%)	57 (62%)	20 (43%)	148 (61%)
Learning conceptual/	36 (34%)	28 (30%)	16 (35%)	80 (33%)
Home like atmosphere	28 (27%)	8 (9%)	14 (30%)	50 (21%)
Emotional support	28 (27%)	11 (12%)	7 (15%)	46 (19%)
Learning physical skills	9 (9%)	9 (10%)	9 (20%)	27 (11%)
Good discipline	9 (9%)	10 (11%)	6 (13%)	25 (10%)
Good supervision	11 (10%)	6 (7%)	6 (13%)	23 (9%)
Good nutrition	4 (4%)	4 (4%)	7 (15%)	15 (6%)
Dependable, reliable caregiver	6 (6%)	0 (0%)	2 (4%)	8 (3%)
Safe/clean environment	1 (1%)	0 (0%)	2 (4%)	3 (1%)
TOTAL RESPONDENTS	105	92	46	N = 243

* Multiple responses were permitted.

Table 6.45A: CHILDREN'S ATTITUDES TOWARD CAREGIVERS BY REGULATORY STATUS
PHILADELPHIA AND SAN ANTONIO

N = 243

ATTITUDES	Sponsored	Regulated	Unregulated	TOTAL
Loving	42 (23%) (63%)	74 (40%) (84%)	68 (37%) (77%)	184 (76%)
Friendly, but not loving	21 (40%) (31%)	13 (24%) (15%)	19 (36%) (22%)	53 (22%)
Indifferent	4 (67%) (6%)	1 (17%) (1%)	1 (17%) (1%)	6 (2%)
Dislike	0 (0%) (0%)	0 (0%) (0%)	0 (0%) (0%)	0 (0%)
TOTAL	67 (28%)	88 (36%)	88 (36%)	243

Table 6.45B: CHILDREN'S ATTITUDES TOWARD CAREGIVERS BY ETHNICITY
PHILADELPHIA AND SAN ANTONIO

N = 235

ATTITUDES	White	Black	Hispanic	TOTAL
Loving	80 (45%) (76%)	59 (33%) (70%)	38 (22%) (83%)	177 (75%)
Friendly, but not loving	24 (46%) (23%)	20 (38%) (24%)	8 (15%) (17%)	52 (22%)
Indifferent	1 (17%) (1%)	5 (83%) (6%)	0 (0%) (0%)	6 (3%)
Dislike	0 (0%) (0%)	0 (0%) (0%)	0 (0%) (0%)	0 (0%) (0%)
TOTAL	105 (45%)	84 (36%)	46 (20%)	235

Table 6.46A: PARENTAL WILLINGNESS TO RECOMMEND CAREGIVER BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 243

WILLINGNESS	Sponsored	Regulated	Unregulated	TOTAL
Yes, would recommend caregiver to a friend	57 (28%) (85%)	80 (40%) (91%)	65 (32%) (74%)	202 (83%)
No, would not recommend caregiver to a friend	10 (24%) (15%)	8 (20%) (9%)	23 (56%) (26%)	41 (17%)
TOTAL	67 (28%)	88 (36%)	88 (36%)	243

Table 6.46B: PARENTAL WILLINGNESS TO RECOMMEND CAREGIVER BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 235

WILLINGNESS	White	Black	Hispanic	TOTAL
Yes, would recommend caregiver to a friend	85 (43%) (81%)	71 (36%) (84%)	40 (20%) (87%)	196 (83%)
No, would not recommend caregiver to a friend	20 (51%) (19%)	13 (33%) (16%)	6 (15%) (13%)	39 (17%)
TOTAL	105 (45%)	84 (36%)	46 (20%)	235

Table 6.47: FIRST REASON FOR RECOMMENDING CAREGIVER*
(Only parents willing to recommend caregiver)

PHILADELPHIA AND SAN ANTONIO

N = 196

REASON	Number	Percent
Caregiver's experience	31	16%
Caregiver's personality	32	16%
Caregiver's skill in teaching children	30	15%
Caregiver's reliability	30	15%
Good home-like setting	18	9%
Other children for child to play with	7	4%
Good discipline	7	4%
Good enough for respondent's child	8	4%
Reasonable fee	6	3%
Good nutrition	6	3%
Caregiver's a relative	4	2%
Children kept clean	4	2%
Location convenient	3	2%
Flexibility in hours	3	2%
Other	3	2%
Good facilities	2	1%
Like sponsoring agency	2	1%
TOTAL	196	100%

*Multiple responses mean total responses may be greater than number of respondents.

Table 6.48: FIRST REASON FOR NOT RECOMMENDING CAREGIVER

(Only parents unwilling to recomend caregiver)

PHILADELPHIA AND SAN ANTONIO

REASON	Number	Percent of Parents Unwilling to Recommend Caregiver N = 38	Percent of Respondents in Philadelphia and San Antonio N = 243
Caregiver unskilled in teaching children	1	3%	(*)
Too many children in care	12	32%	5%
Caregiver too old	1	3%	(*)
Facilities inadequate	2	5%	1%
Caregiver will not take more children	18	47%	7%
Other	4	11%	2%
TOTAL	38	100%	100%

*Less than 1%

Table 6.49A: LENGTH OF TIME RESPONDENTS HAD KNOWN CAREGIVERS BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 213

LENGTH OF TIME	Sponsored	Regulated	Unregulated	TOTAL
Since care began	54 (40%) (84%)	49 (37%) (58%)	31 (23%) (48%)	134 (63%)
0 - 3 months before care began	0 (0%) (0%)	1 (50%) (1%)	1 (50%) (2%)	2 (1%)
3 - 6 months before care began	4 (57%) (6%)	3 (43%) (4%)	0 (0%) (0%)	7 (3%)
6 - 12 months before care began	3 (25%) (5%)	3 (25%) (4%)	6 (50%) (9%)	12 (6%)
1 year or more before care began	3 (5%) (5%)	28 (48%) (33%)	27 (47%) (42%)	58 (27%)
TOTAL	64 (30%)	84 (39%)	65 (31%)	213

Table 6.49B: LENGTH OF TIME RESPONDENTS HAD KNOWN CAREGIVERS BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 206

LENGTH OF TIME	White	Black	Hispanic	TOTAL
Since care began	70 (53%) (70%)	43 (33%) (62%)	18 (14%) (49%)	131 (64%)
0 - 3 months before care began	0 (0%) (0%)	0 (0%) (0%)	1 (100%) (3%)	1 (0%)
3 - 6 months before care began	2 (29%) (2%)	1 (14%) (1%)	4 (57%) (11%)	7 (3%)
6 - 12 months before care began	7 (70%) (7%)	2 (20%) (3%)	1 (10%) (3%)	10 (5%)
1 year or more before care began	21 (37%) (21%)	23 (40%) (33%)	13 (23%) (35%)	57 (28%)
TOTAL	100 (49%)	69 (33%)	37 (18%)	206

Table 6.50A: PARENT/CAREGIVER RELATIONSHIP (NON-RELATIVES)
BY REGULATORY STATUS
TOTAL SAMPLE

N = 270

RELATIONSHIP	Sponsored	Regulated	Unregulated	TOTAL
Close, personal friendship	24 (27%) (29%)	32 (36%) (31%)	32 (36%) (38%)	88 (33%)
Casual friendship	47 (32%) (56%)	55 (37%) (54%)	45 (31%) (54%)	147 (54%)
Businesslike	13 (37%) (15%)	15 (43%) (15%)	7 (20%) (8%)	35 (13%)
TOTAL	84 (31%)	102 (38%)	84 (31%)	270

Table 6.50B: PARENT/CAREGIVER RELATIONSHIP (NON-RELATIVES)
BY ETHNICITY
TOTAL SAMPLE

N = 272

RELATIONSHIP	White	Black	Hispanic	TOTAL
Close, personal friendship	32 (37%) (26%)	29 (33%) (33%)	26 (30%) (42%)	87 (32%)
Casual friendship	72 (48%) (59%)	46 (30%) (52%)	33 (22%) (53%)	151 (56%)
Businesslike	18 (53%) (15%)	13 (38%) (15%)	3 (9%) (5%)	34 (12%)
TOTAL	122 (45%)	88 (32%)	62 (23%)	272

Table 6.51A: PARENT ASKED CAREGIVER FOR CHILDREARING ADVICE BY REGULATORY STATUS

PHILADELPHIA AND SAN ANTONIO

N = 242

ADVICE SOUGHT	Sponsored	Regulated	Unregulated	TOTAL
Yes, parent does ask caregiver for childrearing advice	27 (22%) (40%)	45 (36%) (51%)	52 (42%) (60%)	124 (51%)
No, parent does not ask caregiver for childrearing advice	40 (34%) (60%)	43 (36%) (49%)	35 (30%) (40%)	118 (49%)
TOTAL	67 (28%)	88 (36%)	87 (36%)	242

Table 6.51B: PARENT ASKED CAREGIVER FOR CHILDREARING ADVICE BY ETHNICITY

PHILADELPHIA AND SAN ANTONIO

N = 234

ADVICE SOUGHT	White	Black	Hispanic	TOTAL
Yes, parent does ask caregiver for childrearing advice	51 (43%) (49%)	43 (36%) (52%)	25 (21%) (54%)	119 (51%)
No, parent does not ask caregiver for childrearing advice	54 (47%) (51%)	40 (35%) (48%)	21 (18%) (46%)	115 (49%)
TOTAL	105 (45%)	83 (36%)	46 (20%)	234

Table 6.52A: IMPORTANCE OF AGREEMENT WITH CAREGIVER ON CHILDREARING IDEAS

BY REGULATORY STATUS

TOTAL SAMPLE

N = 292

IMPORTANCE	Sponsored	Regulated	Unregulated	TOTAL
Important	68 (28%) (83%)	87 (36%) (81%)	89 (36%) (87%)	244 (84%)
Not important	14 (29%) (17%)	21 (44%) (19%)	13 (27%) (13%)	48 (16%)
TOTAL	82 (28%)	108 (37%)	102 (35%)	292

Table 6.52B: IMPORTANCE OF AGREEMENT WITH CAREGIVER ON CHILDREARING IDEAS

BY ETHNICITY

TOTAL SAMPLE

N = 284

IMPORTANCE	White	Black	Hispanic	TOTAL
Important	107 (45%) (86%)	75 (32%) (78%)	55 (23%) (86%)	237 (83%)
Not important	17 (36%) (14%)	21 (45%) (22%)	9 (19%) (14%)	47 (17%)
TOTAL	124 (44%)	96 (34%)	64 (23%)	284

Table 6.53A: DIFFERENCES WITH CAREGIVER ON CHILDREARING IDEAS BY REGULATORY STATUS

TOTAL SAMPLE

N = 273

PRESENCE OF DIFFERENCES	Sponsored	Regulated	Unregulated	TOTAL
No, no differences with caregiver	65 (30%) (86%)	82 (37%) (81%)	72 (33%) (75%)	219 (80%)
Yes, some differences with caregiver	11 (20%) (14%)	19 (35%) (19%)	24 (44%) (25%)	54 (20%)
TOTAL	76 (28%)	101 (37%)	96 (35%)	273

Table 6.53B: DIFFERENCES WITH CAREGIVER ON CHILDREARNG IDEAS BY ETHNICITY

TOTAL SAMPLE

N = 264

PRESENCE OF DIFFERENCES	White	Black	Hispanic	TOTAL
No, no difference with caregiver	92 (43%) (79%)	72 (34%) (79%)	48 (23%) (84%)	212 (80%)
Yes, some differences with caregiver	24 (46%) (21%)	19 (37%) (21%)	9 (17%) (16%)	52 (20%)
TOTAL	116 (44%)	91 (34%)	57 (22%)	264

Table 6.54: PARENTAL ATTITUDES TOWARD REGULATION OF SELECTED FEATURES OF FAMILY DAY CARE

LOS ANGELES

N = 91

FEATURES FOR REGULATION	PARENTS IN FAVOR OF REGULATION	
	Frequency	Percentage Of Respondents
Health of Caregiver	86	95%
Safety of FDCH	86	95%
Number of Children	85	93%
Health of Child	80	88%
Training of Caregiver	75	82%
Experience of Caregiver	66	73%
Age of Caregiver	54	59%
Education of Caregiver	40	44%
Age Mix of Children	38	42%
Other	18	20%

Table 6.56: PARENT SATISFACTION WITH SELECTED ASPECTS OF THE FAMILY DAY CARE HOME

LOS ANGELES

N = 1

ASPECTS OF THE CARE ARRANGEMENT	LEVELS OF SATISFACTION					TOTALS		
	N	Very Satisfied	Satisfied	Somewhat Satisfied/ Somewhat Dissatisfied	Dis-satisfied	Very Dis-satisfied	Satis-faction	Dissat- tisfact
Present placement*	26	66%	23%	11%	0%	0%	89%	11%
Location of family day care home	105	72%	18%	6%	3%	1%	90%	10%
Transportation arrangements	103	68%	26%	4%	3%	0%	93%	7%
Hours of care/ Day care schedule	101	65%	28%	5%	1%	1%	93%	7%
Care for the child	24	79%	17%	4%	0%	0%	96%	4%
Evening care	33	71%	19%	7%	3%	0%	90%	10%
Overnight care	19	68%	26%	5%	0%	0%	94%	5%
Weekend care	26	73%	23%	0%	4%	0%	96%	4%
Arrangements for medical appointments	10	60%	40%	0%	0%	0%	100%	0%

*Asked of parents using sponsored family day care homes

Chapter 7.0

CHILD CARE COSTS

7.1 Introduction

Extensive data from the caregiver component of the National Day Care Home Study revealed that after their expenses had been paid, the income of caregivers was well below the federal minimum wage. To be assured of minimum pay, caregivers operating sponsored homes would have to increase fees per child by 68%, those operating regulated homes would have to increase fees by 96.9%, and those providing care in unregulated homes would have to increase fees by 107.6% (Vol. II, AAI, 1980). Such increases would severely burden the consumers of family day care.

Parents seem to recognize at some level that their caregivers contribute more to the arrangement than they are compensated for. The NDCHS parent data revealed that 59% of the parents would be willing to pay more for more services. Sixty-six percent of parents stated that caregivers set the fee; caregivers, it appears, could demand and obtain higher fees. However, the caregiver data suggests that providers do not perceive themselves as entrepreneurs; for example, of those who filed a tax return, few appeared aware of the tax deductions available to them to offset business expenses. Most women apparently began providing family day care not because of the extra money they could thereby earn, but because they became aware of a personal or community need that they were competent to fill.

NDCHS data on costs of care will assist federal policy makers in predicting the potential cost of regulations to both providers and consumers. Parent preferences concerning such cost-related variables as the number and mix of children in care and the training and experience of the caregiver will inform decisions regarding equitable levels of reimbursement for day care providers.

This chapter reports the cost to parents of the family day care arrangement. It differentiates among families according to whether the parents, an agency, or some combination of the two bears these costs, and examines as well the costs of day care as a function of the type of home, the location, the ethnicity of the family, whether the caregiver is a relative, and other classifiable variables. The section also explores respondents' attitudes toward the fee paid by the family, their ability and willingness to pay more for the same or increased services, the method of setting fees, and communications between the caregiver and the parents regarding the cost of care.

The parent interview was designed to collect data relevant to these topics. As well as gathering information on who pays for day care and how much, the survey instrument elicited responses to the following questions:

- Are parents satisfied or dissatisfied with their family day care fees?

- Are parents willing to pay more for the same services or additional services?
- Are parents able to pay more?
- Do fees paid tend to be lower for parents using care by a relative or close friend?
- Do similarities and differences exist among the three types of homes and/or among ethnic groups relative to these issues?
- Is the availability of child care options restricted by what parents are able to pay?
- Is the cost of care a major factor in the selection of family day care?

7.2 Who Bears the Cost of Family Day Care?

The cost of family day care was borne by 78% of the 348 families surveyed and by the sponsor or agency in 16% of the cases; in 4% of the cases the cost was divided between the parents and the agency or sponsor. For the remaining 2%, a relative paid all or part of the cost (Table 7.2).

The proportions of families paying all, part, or none of the cost of care differed among the three sites, as shown in Table 7.1. The percentage of families in which the parents paid for family day care was much lower in Philadelphia than in Los Angeles or San Antonio. In Philadelphia 38% of the families interviewed received fully subsidized day care, at least for the target child, while complete subsidization was reported by only 6% of the respondents in Los Angeles. The dearth of sponsored homes in the San Antonio sample and the relatively high income of the families contacted there, relative to local area wage and price indices, suggest that the sample there represented a different population from the one in Los Angeles.

Table 7.2 presents an analysis of who paid for family day care by regulatory status of the day care home and by family ethnicity. In more than 90% of the non-sponsored homes (regulated or unregulated) the family assumed full responsibility for payment of fees. By contrast, in 49% of the sponsored homes the sponsor or another agency bore the full cost of care, and only 50% of the families paid all or part of the cost. Only 12% of the families who bore all costs had placed their child in a sponsored home while 87% (52 out of 60) of the children receiving subsidized care were in sponsored homes.

The full cost of day care was borne by 87% of the White families and by 78% of Hispanic families. The percentage among Black families, however, was somewhat lower at 68%. Among the 60 families who received some level of financial assistance for child care, 25% were White, 52% were Black, and 23% were Hispanic.

7.3 How Much Do Parents Pay for Family Day Care?

The distribution of weekly payments by families for family day care is presented in Tables 7.3 and 7.5.[1]

7.3.1. Families Who Pay All Costs

As shown in Table 7.3, the overall median weekly family payment to a provider of family day care was $26.35, based on the aggregated data from all three sites. In 69% of the cases, the weekly payment was between $15.00 and $35.00, with the mode from $25.00 to $29.99.

Examination of the data in Table 7.3 reveals cost differences among sites, with Los Angeles respondents reporting the highest costs and San Antonio respondents the lowest. The median payments to caregivers in Los Angeles, Philadelphia, and San Antonio were $31.74, $27.39, and $22.11, respectively. These differences probably reflect local area incomes and living costs.

Weekly median incomes for the families in the three sites were compared with the median amounts paid to the caregivers. Over the full sample, families who pay all costs spend approximately 11% of their pre-tax income for family day care.

The distributions for the total cost of all day care arrangements for the target child are very similar to those for payments to the caregiver. This is consistent with the finding that most of the child care arrangements studied involved one child per family and that the bulk of non-parental care for the focus child was provided by the caregiver.

Families who reported paying for day care for more than one child reported family child care costs approximately 40% more than the cost of care for the target child alone. This suggests that discounts for more than one child, rather than flat, per-child rates, applied.

Cost categories were established for the present study as follows:

- o Low - Under $15.00 per week
- o Middle - $15.00-$24.99 per week
- o High - $25.00 or more per week.

Among families in which the parents bore all the costs, 14% paid fees in the low-cost category, 29% in the middle-cost category, and 57% in the high-cost category.

Table 7.4 presents an analysis of the amount paid by families by the regulatory status of the home and the family's ethnicity. In viewing the data in this table, the reader must remember that families who paid the full cost of care tended not to have their children in sponsored homes. The cost of care in sponsored homes is curiously bimodal, with 41% of the cases in the low-cost range and 35% in the high cost range but fewer in the middle range. This bimodality may reflect gradation of fees based on the parents' ability to pay. Care in regulated homes tended to be the most expensive type, with 50% of the families paying fees in the high-cost range. The proportion of unregulated homes charging full-paying parents high rates was almost equal to that among the regulated homes, but far more unregulated homes (32%) than regulated homes (13%) charged full-paying families low rates.

A correlation exists between family ethnicity and rates paid: a larger percentage of Whites paid high rates than Blacks, and Hispanics had the greatest proportion of low-cost child care arrangements.

7.3.2 Families Receiving Partially Subsidized Child Care

Data from San Antonio and Philadelphia permitted clear identification of families who received partial assistance from an agency in paying for family day care and those who paid discounted prices. There were only 15 such families in the sample, representing 6% of the total sample and 27% of those receiving some degree of financial assistance. The frequency distributions of costs paid by these families are shown in Table 7.5 differentiated by study site and type of expenditure. Caution must be exercised in drawing inferences from such small numbers of cases, particularly because the median costs were extremely sensitive to increases or reductions in the number of cases. The median amounts paid to the caregiver by partially subsidized families were $17.50 in the two sites combined--$14.16 in Philadelphia and $23.33 in San Antonio. These amounts probably reflect local and agency or sponsor-specific financial assistance policies much more than cost trends.

7.3.3 Cost of Care by a Friend or Relative

Over the total sample, about one-third of the respondents reported that the caregiver was a close friend or relative. The data collected make it possible to determine whether parents paid less to such caregivers. According to the data summarized in Table 7.6, there was little tendency for care by a friend or relative to cost families less than care by a non-friend or non-relative. Among the 47 respondents who paid nothing, the percentage of parents who reported that the caregiver was a friend or relative (32%) did not differ significantly from the overall percentage (33%).

7.3.4. Families Who Paid Nothing

In Philadelphia and San Antonio 47 parents, 20% of the total, reported that they paid nothing to the caregiver. It is important to know who these families are. Table 7.7 presents a summary of the distribution of these cases by regulatory status and by ethnicity. Most of the non-paying families (42, or 89%) had a child in a sponsored home. Of the five remaining families, two received free child care from a relative. One of these two respondents named cost as the prime consideration in the selection of family day care, while the other identified the emotional needs of the child as primary. Most (68%) of the non-paying families were Black.

Data not represented in Table 7.7 show that most of the Phase III families who paid nothing for family day care were in the Philadelphia sample (between 72% and 85%).* This difference between proportions of non-paying families at the two Phase III sites can probably be accounted for by the dearth of sponsored homes in San Antonio.

7.4 Association of Fees Paid and Income

Table 7.8 differentiates among the families surveyed by the cost of the family day care arrangement and the income of the family. The tendency for fees paid to increase in direct proportion to family income was strong; the high association chi square value confirms this relationship statistically.

Regardless of the strong overall association of income and fees paid for child care, there were notable exceptions. Some high-income families used low-cost care and some low-income families paid high costs for care. The three upper right and the three lower left cells in Table 7.8 show that 48 higher-income families (31% of the 154 families with incomes over $12,000) paid unexpectedly little for child care, and that 37 lower-income families (45% of the 83 families with incomes under $12,000) paid unexpectedly large amounts for child care.

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*/ Precision is not possible since cases are missing from the analysis because of the absence of data unrelated to the present discussion. The values presented bracket the possible range.

The fact that nearly a third of the higher-income families paid less than $25.00 per week for care of the target child suggests that Emlen might be right in concluding that families who could afford to pay more paid a "going rate" (Emlen, Donoghue, and Clarkson, 1974, p. 96). One of the important factors in the cost equation is the parents' perceptions of their ability to pay more, regardless of any objective analysis of family economics.

7.4.1 Parents' Ability To Pay More

Parents in both phases of data collection were asked "The way things cost now, could you afford to pay more for child care?"* Among the 287 families for whom day care is not fully subsidized, 109 (38%) reported that they could pay more and 178 (62%) reported that they could not.

Thirty percent of the parents in Philadelphia and San Antonio reported that they could afford to pay more for child care, as contrasted to 52% of the parents in Los Angeles. This difference may be related to the total family expenditures for child care, or it may reflect the effects of inflation of prices between the times the two phases were conducted. Unlike the amounts parents paid to the caregiver, the total family expenditures for child care were greater in Philadephia and San Antonio than among the families interviewed in Los Angeles.

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*/ Any bias introduced by the first clause of this sentence was the same for all respondents.

Parents' reports of their ability to pay more are presented in distribution form in Table 7.9 as a function of the fee they paid at the time they were interviewed. Cases represented here are those families in Philadelphia and San Antonio who paid all fees without assistance. The large proportion of parents who reported that they were paying low fees but could not afford to pay more (78% "not able") may reflect the low incomes of families in this category. The slight reversal of trend seen when the percentage of respondents who reported they could pay more is examined in conjunction with fee currently paid (22% "yes" for the low-fee group, 40% for the medium-fee group, and 35% for the high-fee group) may reflect the responses of the low-income families who pay high fees. The parents' perceptions of whether they could afford to pay more may not have reflected their actual financial circumstances, as was suggested earlier. The belief that they were unable to pay more may have arisen from dissonance aroused by a conflict between their perception that the fee they pay is too low and the recognition that they have not offered to pay more. Self-justification, whether conscious or unconscious, may have biased responses to this question.

7.5 Parents' Attitudes Regarding the Fees They Pay

The parent survey explored attitudes toward the amount paid for family day care with three direct questions, whose general contents were as follows:

- o Based on the services the caregiver provides, do you think that the fee is too high, about right, or a little low?
- o Could you afford to pay more for chid care?
- o Would you be willing to pay more for the same service?
- o Would you be willing to pay more for more services?

These questions are related to a larger set of feelings and perceptions regarding the availability of special services, the adequacy of present services, the perceived need for additional services, the capacity to pay more, and other social and attitudinal factors. It is important for the present analysis that a few of these connections be explored, but a systematic treatment of them is beyond the scope of this report.

7.5.1 Level of Satisfaction with Present Fee

Findings regarding parents' attitudes toward the fees they paid are summarized in Tables 7.10 and 7.11. Over the total sample of 288 parents who paid for family day care, 63% reported that they felt the fee was "about right." Only 8% felt the cost was too high, while 29% said they felt it was "a little low." In Table 7.10, the distributions of parents' responses to this question are disaggregated by study site, regulatory status, and ethnicity. The most prominent conclusion to be drawn from these statistics is that the majority of parents felt that the fees they paid for child care were appropriate for the level of service they and their child received. While a majority expressed satisfaction, the actual extent of that majority varied from 54% to 76%, depending upon regulatory status, site, and ethnicity. This concentration of respondents in the middle category may suggest a methodological problem in scaling response alternatives.

There were slight differences in the proportions of parents responding in the three categories. These differences may suggest somewhat less positive attitudes toward fees paid in Los Angeles, where fees are in fact somewhat higher, and for care in regulated homes, which costs somewhat more, as shown in Table 7.4. The relationship between ethnicity and the parents' attitude toward the fee paid is ambiguous and probably depends upon other variables that are correlated with ethnicity.

In Table 7.11, attitudes regarding the fee paid are examined in relation to the range of the fee and the family income. Like the data in Table 7.10, the statistics represented here show a strong tendency of parents to report that the fee is "about right." Responses of "about right" range from 51% to 68%, depending on the values of the two other variables.

Common sense leads us to expect that the amount of the fee is associated with the perception that it is too high, about right, or a little low. The data reported in Table 7.11 confirm this hypothesis (chi square for association = 12.64, p greater than .02). When parents' attitudes toward the fees they paid are examined in relationship to the family income, however, no systematic trend emerges.

7.5.2 Willingness to Pay More

Parents were asked whether they would be willing to pay more for the same child care service and, in a separate question, more for more service. Overall, 59% indicated that they would be willing to pay more for the same service and 69% indicated willingness to pay more for more service. The pattern of responses to the four questions was as follows:

- While 30% felt that the fee was too low, 70% saw it as about right or too high.
- Almost 60% would be willing to pay more for the same service and about another 10% would pay more if more services were included.
- Over 60%, however, said they could not afford to pay more "the way things are now."

The details of this pattern will be examined in this section.[2]

Table 7.12 presents data regarding parents' willingness to pay more in relation to study site. In Philadelphia, fewer than half the respondents were willing to pay more for the same service (48%), while 77% were willing to pay more for more service. The data from San Antonio present a curious reversal. While 67% of the parents there indicated they would be willing to pay more for the same service, only 60% reported willingness to pay more for more service. If these data are correct and if the question was properly understood, this paradox might suggest a high degree of satisfaction with present services and an expectation that more services would cost significantly more.

Reported willingness to pay more for child care seems to have varied with the amount presently paid, the perception of the appropriateness of that amount, and, possibly, with the capacity of a family to pay more within its budgetary constraints. Pertinent data are presented in Tables 7.13, 7.14, and 7.15. Not all data are available for all sites.

Although in Philadelphia and San Antonio the majority of parents indicated a willingness to pay more for the same service, that willingness declined as the fee currently paid increased, falling to 52% "yes" among respondents who pay high fees, as reported in Table 7.13. Willingness to pay more for more service was higher overall, as has been noted, but there appears to be no systematic relationship between responses to this question and the fee paid.

Data from Los Angeles relevant to the relationship between willingness to pay more and attitude toward the present fee are presented in Table 7.14. The large concentration of responses in the "about right" category, noted earlier in the discussion of parents' attitudes toward the cost of care, makes interpretation of this relationship risky. The patterns, however, are clear. Those who perceived the fee to be too high were unwilling to pay more for the same service and less likely than others to be willing to pay more for more service. Those who believed the fee to be too low were more likely to be willing to pay more for child care than were those who believed the fee to be appropriate. Those who believed the fee was "about right" were almost evenly divided on their willingness to pay more for the same service, but most of them (79%) were willing to pay more for more service.

Finally, Table 7.15 presents the aggregate data regarding the connection between parents' reported ability to pay more and their willingness to pay more. The pattern, as expected, shows that a large portion of those who indicated that they could afford to pay more also said they were willing to pay more for the same service (72%) and for more services (80%). Twenty percent reported they were able to pay more but were unwilling to, even if services were increased. Those who were unable to pay more were about evenly divided on the question of willingness, but when more services were mentioned, more respondents than not expressed willingness to pay more (62% versus 38%). Among those who said they were unwilling to pay more for more services, 76% said that they could not afford to pay more.

7.6 Role of Cost in Decisions on Day Care Arrangements

The parent questionnaire contained three questions designed to elicit the respondent's recollection of the role of cost in the selection of the day care arrangement. Paraphrased, these questions were:

> What were the main reasons you chose family day care? (open-ended)
>
> What were your reasons for choosing the particular caregiver? (open-ended)

> Which child care options (from a pre-defined list) did you seriously consider, and (for those seriously considered) why did you reject them?

The first two questions addressed the positive aspects of the choice while the last addressed the limitations of choices.

Cost was the most frequent single reason given for choosing family day care over other forms of day care. Of the 348 parents interviewed, 11% (37) named cost as the primary factor in the choice of family day care as opposed to in-house care, center-based care, or some other arrangement. In Philadelphia and San Antonio the survey instrument allowed secondary reasons to be recorded. Another 6% (13 of the 212 who gave more than one response and who had not already named cost) gave cost as an additional reason.

The choice of the particular caregiver was influenced primarily by cost for 5% of the parents (18 of 348). Cost was mentioned as one of the secondary reasons for selecting a particular caregiver by another 4% (ten of the 228 who gave more than one response and who had not already named cost) in Philadelphia and San Antonio.

Table 7.16 presents data on the 110 parents (45% of the total of 243) in Philadelphia and San Antonio who indicated that they had seriously considered other day care arrangements before making their final choice. Since only 114 alternatives had been considered, we can infer that most respondents seriously considered only one other type of child care arrangement. The data of primary interest here are the numbers of times cost was named as the reason for rejecting an arrangement after serious consideration. Cost was rarely the reason for rejecting center-based care, but it did figure prominently in the rejection of in-home care. There were not enough instances in which other family day care arrangements were considered to make an inference.

This question does not fully address the problem of perceived (or actual) cost in the rejection of child care arrangements by type or by case. Parents may fail to reach the point of serious consideration of an option, and anticipated cost may be a factor in rejection prior to the search stage.

In summary, the present data suggest that cost was a factor both in the choice of type of day care arrangement and in the selection of the specific arrangement finally adopted. It was a salient factor for only about 10% of the parents surveyed. However, it is not possible, from the present data, to assess fully the importance of cost in child care decisions.

7.7 Interactions with the Caregiver Concerning Fees

Parents in Philadelphia and San Antonio were asked questions dealing with who had set the fees and with their communications with their caregiver regarding fees. Approximately 88% of the 192 paying parents reported that they had discussed the fee with the caregiver before care began. Whether fees were set at that time or later, 66% of the parents indicated that the caregiver had suggested the fee while 17% of the parents said they had suggested it themselves. For 9% of the cases the fee had been negotiated, while in 7% it had been established by an agency.

Prior discussion of cost with the caregiver was reported by only 41% of the parents using sponsored homes, while 99% of those using regulated homes and 88% of those using unregulated homes reported such discussions. There were no significant associations of prior discussion of fees with site or ethnicity.

Most respondents (83% of 187) indicated that they felt they could discuss changing the fee with the caregiver if the fee turned out to be more than they could afford. When parents are considered by ethnicity, home regulatory status, and site, the percentage of positive responses to this question varies from 77% to 95%. Less ability to discuss changing cost seemed to be present among Whites (79%), in Philadelphia (77%), and among users of regulated homes (78%), while higher numbers of Hispanics (88%), more users of sponsored homes (95%), and more residents of San Antonio (87%) reported that they felt they could discuss changing the fee.

Only 19 parents (10% of 192 respondents) reported that they sometimes had trouble paying fees for family day care. Nine of the 19 families were White, four were Black, and six were Hispanic. They were evenly distributed according to home regulatory status and site.

These 19 parents were asked what happened when they had trouble paying. None of them reported that the caregiver asked them for payment. Most of them (14) reported that they told the caregiver they would be late in paying. Three reported that they didn't talk with the caregiver about it but paid when they could. The remaining two used another approach.

7.8 Summary

In summary, the major findings regarding the costs of family day child care are as follows:

- Over three-quarters of the parents in the sample paid the full cost of family day care for their child, while an agency or sponsor paid all the fees in one-sixth of the cases. However, the families in the Philadelphia sample were six times as likely to receive fully subsidized family day care as the families surveyed in Los Angeles and San Antonio. White parents in the sample were more likely to bear the full cost of care than were Black parents, but most parents in each ethnic group assumed full responsibility for paying the fee.
- The median fee for family day care was $26.35 for families who paid all costs and $17.50 for families who received assistance in paying part

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of the fee. Families who paid all costs typically paid almost 11% of their pre-tax income for care.

- Fees paid by parents differed between study sites. Family day care was most costly in Los Angeles and least costly in San Antonio. Care in regulated homes cost more than care in sponsored and unregulated homes. White families tended to pay more for care than Black families, who tended to pay more than Hispanic families.
- One-third of the children received care from a relative or close friend of the parents. The families of these children did not differ from the rest of the sample in the fees they paid.
- Forty-seven families--about one-eighth of the total sample--paid nothing for child care. Most of these families had their children in sponsored homes.
- Fees paid for child care were highly correlated to family income, but many upper-income families paid unexpectedly little for child care.
- Almost two-thirds of the paying parents reported that they could not afford to pay more for child care "the way things are now."
- Most of the parents reported that they thought the fee they paid for family day care was about

right, considering the services they and their children received. More than a quarter felt that the fees were too low.

- More than half of the parents indicated that they would be willing to pay more for the same services. Over two-thirds said they would be willing to pay more if more services were provided.
- Parents' willingness to pay more was closely related to their perception of the present fee as too high, about right, or too low.
- Approximately one-fifth of the parents were unwilling to pay more, even to get more services, despite the fact that they could afford to pay more.
- About 10% of the parents said that cost was the most important factor in choosing family day care. However, fewer than half had seriously considered another arrangement, and very few had rejected another day care arrangement on the basis of cost.
- Almost 90% of the parents reported that they had discussed fees with the caregiver before the arrangement started. Fees were discussed in advance in almost all regulated homes.

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- According to the parents, the caregivers set the fee in about two-thirds of the cases. Nonetheless, most of the parents felt they could discuss lowering the fee with the caregiver if they found it excessive.
- Only 10% of the respondents reported having had trouble paying on time; in most cases those parents said that they had informed the caregiver that their payment would be late.

NOTES

1 Responses to other questions in the survey instruments were used to differentiate families according to whether fees were paid by the parent, the agency or sponsor, a relative, or some combination of these. The cost data in Table 7.3 are based on the reports of parents who received no assistance in paying child care costs, while data for families in which the parents paid part of the cost and received assistance for the rest are presented in Table 7.5. The questions regarding cost on the Phase II survey instrument asked for the cost of care, regardless of who paid, while those in the Phase III instrument dealt with the cost to the parent.

In the data from Los Angeles, when costs were split between the family and the sponsor or agency, it was impossible to determine how much the family paid. Los Angeles, the site of Phase II data collection, is therefore not included in Table 7.5.

The categories of payments represented in Table 7.3 and 7.5 are: the total amount the family paid to the caregiver weekly; the total amount the parent paid for child care for the focus child weekly regardless of whether the provider is the identified family day care provider or some other caregiver or center; and the total amount the family paid per week for care of all children under 18. The total paid to the caregiver included payment for more than the single focus child in approximately 6% of the cases. Note that Table 7.3 contains percent frequencies and that Table 7.5 contains raw frequencies.

2 A logical approach to the two questions regarding willingness to pay more suggests that an ordinal scale, consisting of the values (1) not willing to pay more for more services, (2) willing to pay more for more services, and (3) willing to pay more for the same services, might be developed to consolidate the two items and simplify the analysis. The assumptions here would be that there are no cases where a parent would be willing to pay more for the same service where he or she would not also be willing to pay more for more services, or, conversely, that unwillingness to pay more for more services implies unwillingness to pay more for the same services. Eight cases, all in San Antonio, violate these assumptions.

Table 7.1: PERCENT FREQUENCY DISTRIBUTION OF FAMILIES BY RESPONSIBILITY FOR CHILD CARE COSTS BY STUDY SITE

TOTAL SAMPLE

N = 316

PARTY WHO PAYS CHILD CARE COSTS	Los Angeles	Philadelphia	San Antonio
Parents	84%	67%	89%
Agency or sponsor	6%	38%	4%
Parents and agency or sponsor split fees	10%	1%	3%
Relative or other source split fees with parents	-	1%	4%
Number of Cases	98	106	112

Table 7.3: DISTRIBUTION OF FAMILIES BY PARTY PAYING FAMILY DAY CARE FEES BY TYPE OF HOME AND ETHNICITY

TOTAL SAMPLE

N = 313, 305

SUBSAMPLE	Party Paying Family Day Care Fees				
	Family Pays All Fees	Agency or Sponsor Pays All Fees	Family Splits Fees With Agency or Sponsor	Other Arrange-ments	TOTAL
Sponsored Homes	29 (35%) (12%)	40 (49%) (85%)	12 (15%) (92%)	1 (1%) (17%)	82 (26%)
Regulated Homes	112 (93%) (45%)	5 (4%) (11%)	1 (1%) (8%)	2 (2%) (33%)	120 (38%)
Unregulated Homes	106 (95%) (43%)	2 (2%) (4%)	0 (0%) (0%)	3 (3%) (50%)	111 (36%)
TOTAL	247 (79%)	47 (15%)	13 (4%)	6 (2%)	313
White	115 (87%) (48%)	12 (9%) (26%)	3 (2%) (23%)	3 (2%) (50%)	133 (44%)
Black	71 (68%) (30%)	30 (29%) (64%)	1 (1%) (8%)	2 (2%) (33%)	104 (34%)
Hispanic	53 (78%) (22%)	5 (7%) (11%)	9 (13%) (69%)	1 (1%) (17%)	68 (22%)
TOTAL	239 (78%)	47 (16%)	13 (4%)	6 (2%)	305

Table 7.3: DISTRIBUTION OF AVERAGE WEEKLY EXPENDITURES FOR FAMILY DAY CARE IN LOS ANGELES, PHILADELPHIA AND SAN ANTONIO[1] IN PERCENT FREQUENCIES*

TOTAL SAMPLE - FAMILIES WHO PAY ALL COSTS

N = 245

EQUIVALENT WEEKLY RATE (in dollars)	Los Angeles	Philadelphia			San Antonio			Aggregate
	Total Paid To Caregiver	Total Paid To Caregiver	Total For Focus Child	Total For Family	Total Paid To Caregiver	Total For Focus Child	Total For Family	Total Paid To Caregiver
0	0	0	0	0	2	2	5	1
.01 - 4.99	1	0	0	0	3	2	0	2
5.00 - 9.99	5	3	3	0	7	7	5	5
10.00 - 14.99	1	5	5	7	12	12	5	6
15.00 - 19.99	6	6	3	7	16	15	7	10
20.00 - 24.99	11	17	18	20	26	25	9	19
25.00 - 29.99	19	36	34	0	24	24	11	26
30.00 - 34.99	23	14	16	7	7	9	23	14
35.00 - 39.99	11	8	8	13	3	3	11	7
40.00 - 49.99	14	6	10	13	6	1	16	6
50.00 - 59.99	5	5	3	26	0	0	5	3
60.00 - over	4	0	0	7	0	0	2	1
Number of cases	79	66	62	15	100	100	43	245
Median Fee	$31.74	$27.39	$28.09	$30.46	$22.11	$22.60	$32.28	$26.35
Median Weekly Income	$230 - 288	$173 - 230			$230 - 288			$243

* Each column based on percent frequencies.

1. Excludes 15 families receiving partial assistance for child care expenses for whom data are presented later in this chapter.
2. Based on Current Population Report for 1977, U.S. Bureau of the Census.
3. Excludes those who pay nothing.

Table 7.4: DISTRIBUTION OF LOW-, MEDIUM-, AND HIGH- COST CHILD CARE AMONG FAMILIES WHO PAY ALL COSTS BY REGULATORY STATUS AND PARENT ETHNICITY

TOTAL SAMPLE

SUBSAMPLE[1]	WEEKLY FEES PAID FOR FAMILY DAY CARE			
	Low[2] Under $15	Medium $15 - $24.99	High $25 or more	TOTAL
TYPE OF HOME				
Sponsored	15 (41%) (23%)	9 (24%) (11%)	13 (35%) (12%)	37 (14%)
Regulated	15 (13%) (24%)	42 (37%) (53%)	56 (50%) (50%)	113 (44%)
Unregulated	34 (32%) (53%)	29 (27%) (36%)	43 (41%) (38%)	106 (42%)
TOTAL	64 (25%)	80 (31%)	112 (44%)	256
ETHNICITY				
White	17 (14%) (27%)	37 (30%) (47%)	69 (56%) (62%)	123 (48%)
Black	22 (30%) (34%)	23 (31%) (29%)	29 (39%) (26%)	74 (29%)
Hispanic	25 (43%) (39%)	19 (33%) (24%)	14 (24%) (12%)	58 (23%)
TOTAL	64 (25%)	79 (31%)	112 (44%)	255

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[1] Excludes Phase II respondents who reported that an agency pays part or all of cost.

[2] Excludes families where respondents reported that parents pay nothing (Phase III).

Table 7.5: DISTRIBUTION OF AVERAGE WEEKLY PARENT EXPENDITURES FOR FAMILY DAY CARE IN PHILADELPHIA AND SAN ANTONIO (IN FREQUENCIES)

PARTIALLY SUBSIDIZED FAMILY ONLY

EQUIVALENT WEEKLY RATE (in dollars)	Philadelphia			San Antonio			Aggregate
	Total Paid To Caregiver	Total For Focus Child	Total For Family	Total Paid To Caregiver	Total For Focus Child	Total For Family	Total Paid To Caregiver
0	0	0	1	0	0	0	0
.01 - 4.99	0	0	0	2	2	0	2
5.00 - 9.99	1	1	0	0	1	1	1
10.00 - 14.99	3	1	0	0	0	0	3
15.00 - 19.99	1	1	0	0	1	0	1
20.00 - 24.99	1	1	0	2	1	1	3
25.00 - 29.99	0	2	0	2	1	0	2
30.00 - 34.99	0	0	0	0	0	0	0
35.00 - 39.99	0	1	0	1	2	1	1
40.00 - 49.99	0	0	0	0	0	0	0
50.00 - 59.99	0	0	0	0	0	0	0
60.00 - over	0	0	0	0	0	1	0
Number of cases	6	7	1	7	8	4	13
Fee	$14.16	$22.50	0	$23.33	$20.00	$25.00	$17.50
Median Income Per Week*	$173 - 230			$230 - 288			

*Based on Census Bureau's Current Population Survey, 1977.

Table 7.6: DISTRIBUTION OF FEES PAID BY FAMILIES FOR FAMILY DAY CARE BY RELATIONSHIP TO CAREGIVER

TOTAL SAMPLE

RELATIONSHIP TO CAREGIVER	No Fee $0	Low Fee Under $15	Medium Fee $15 - $24.99	High Fee $25 or more	TOTAL
Friend or Relative	15 (15%) (32%)	20 (20%) (42%)	28 (29%) (31%)	35 (36%) (32%)	98 (33%)
Not a Friend or Relative	32 (16%) (68%)	28 (14%) (58%)	61 (31%) (69%)	75 (38%) (68%)	196 (67%)
TOTAL	47 (16%)	48 (16%)	89 (30%)	110 (38%)	294

Table 7.7: DISTRIBUTION OF FAMILIES WHO PAID NOTHING BY REGULATORY STATUS AND ETHNICITY PHILADELPHIA AND SAN ANTONIO

ETHNICITY	REGULATORY STATUS OF HOME			
	Sponsored	Regulated	Unregulated	TOTAL
White	12 (100%) (29%)	0 (0%) (0%)	0 (0%) (0%)	12 (26%)
Black	27 (84%) (64%)	2 (6%) (100%)	3 (10%) (100%)	32 (68%)
Hispanic	3 (100%) (7%)	0 (0%) (0%)	0 (0%) (0%)	3 (6%)
TOTAL	42 (89%)	2 (4%)	3 (7%)	47

Table 7.8: DISTRIBUTION OF FEES PAID BY PARENTS FOR FAMILY DAY CARE BY FAMILY INCOME*

TOTAL SAMPLE OF PAYING FAMILIES

N = 237

RANGE OF FEE PAID FOR FAMILY DAY CARE	Family Income Range				
	Under $6,000	$6,000-$12,000	$12,000-$18,000	Over $18,000	TOTAL
Low Under $15	12 (27%) (48%)	13 (29%) (23%)	9 (20%) (13%)	11 (24%) (13%)	45 (19%)
Middle $15-24.99	8 (9%) (32%)	21 (24%) (36%)	31 (35%) (44%)	28 (32%) (33%)	88 (37%)
High $25 or more	5 (5%) (20%)	24 (23%) (41%)	30 (29%) (43%)	45 (43%) (54%)	104 (44%)
TOTAL	25 (11%)	58 (24%)	70 (30%)	84 (35%)	237

*Chi Square for association = 20.51 DF = 6 P< .003. Does not include families who pay nothing toward the cost of child care.

Table 7.9: DISTRIBUTION OF FAMILIES BASED ON REPORTED ABILITY TO PAY MORE FOR CHILD CARE AND AMOUNT PRESENTLY PAID

PHILADELPHIA AND SAN ANTONIO

RANGE OF FEE PRESENTLY PAID	Able To Pay More	Not Able To Pay More	TOTAL
Low (but not free)	6 (22%) (11%)	21 (78%) (20%)	27 (16%)
Medium	23 (40%) (40%)	34 (60%) (32%)	57 (35%)
High	28 (35%) (49%)	52 (65%) (48%)	80 (49%)
TOTAL	57 (35%)	107 (65%)	164

Table 7.10: DISTRIBUTION OF PARENTS' ATTITUDES REGARDING FEE FOR TOTAL SAMPLE BY SITE BY REGULATORY STATUS AND BY ETHNICITY

TOTAL SAMPLE OF PAYING PARENTS

SITE	ATTITUDE REGARDING FEE			TOTAL
	"Too High"	"About Right"	"A Little Low"	
Los Angeles	13 (13%) (57%)	62 (65%) (34%)	21 (22%) (25%)	96 (33%)
Philadelphia	6 (8%) (26%)	47 (59%) (26%)	26 (33%) (31%)	79 (28%)
San Antonio	4 (3%) (17%)	73 (65%) (40%)	36 (32%) (44%)	113 (39%)
TOTAL	23 (8%)	182 (63%)	83 (29%)	288
REGULATORY STATUS				
Sponsored	4 (8%) (18%)	38 (76%) (21%)	8 (16%) (10%)	50 (17%)
Regulated	13 (11%) (59%)	82 (67%) (45%)	27 (22%) (32%)	122 (43%)
Unregulated	5 (4%) (23%)	62 (54%) (34%)	48 (42%) (58%)	115 (40%)
TOTAL	22 (8%)	182 (63%)	83 (29%)	287
ETHNICITY				
White	10 (8%) (45%)	83 (63%) (46%)	38 (29%) (49%)	131 (47%)
Black	5 (7%) (23%)	51 (70%) (29%)	17 (23%) (22%)	73 (26%)
Hispanic	7 (9%) (32%)	45 (61%) (25%)	22 (30%) (29%)	74 (27%)
TOTAL	22 (8%)	179 (64%)	77 (28%)	278

Table 7.11: DISTRIBUTION OF PARENTS' PERCEPTIONS OF FEES AS "TOO HIGH", "ABOUT RIGHT", OR "TOO LOW" BY RANGE OF FEE PAID AND BY FAMILY INCOME

TOTAL SAMPLE OF PAYING PARENTS

SUBSAMPLE	ATTITUDE REGARDING FEE			TOTAL
RANGE OF FEE PAID	"Too High"	"About Right"	"A Little Low"	
Low	1 (2%) (5%)	23 (51%) (16%)	21 (47%) (30%)	45 (19%)
Medium	7 (8%) (35%)	50 (59%) (35%)	28 (33%) (40%)	85 (36%)
High	12 (12%) (60%)	71 (68%) (49%)	21 (20%) (30%)	104 (45%)
TOTAL	20 (9%)	144 (61%)	70 (30%)	234
BY FAMILY INCOME				
Under $6,000	2 (9%) (10%)	15 (68%) (11%)	5 (23%) (7%)	22 (9%)
$6,000 - $12,000	3 (5%) (15%)	36 (62%) (25%)	19 (33%) (27%)	58 (25%)
$12,000 - $18,000	10 (14%) (50%)	38 (54%) (26%)	22 (32%) (32%)	70 (30%)
Over $18,000	5 (6%) (25%)	55 (65%) (38%)	24 (29%) (34%)	84 (36%)
TOTAL	20 (9%)	144 (61%)	70 (30%)	234

Table 7.12: DISTRIBUTION OF RESPONSES TO QUESTIONS ON WILLINGNESS TO PAY MORE BY STUDY SITE

TOTAL SAMPLE

STUDY SITE	WILLINGNESS TO PAY MORE FOR.....					
	The Same Service			More Service		
	Yes	No	TOTAL	Yes	No	TOTAL
Los Angeles	45 (58%) (29%)	33 (42%) (30%)	78 (29%)	57 (73%) (32%)	21 (27%) (26%)	78 (30%)
Philadelphia	37 (48%) (23%)	40 (52%) (36%)	77 (29%)	54 (77%) (30%)	16 (23%) (19%)	70 (27%)
San Antonio	76 (67%) (48%)	37 (33%) (34%)	113 (42%)	68 (60%) (38%)	45 (40%) (55%)	113 (43%)
TOTAL	153 (59%)	110 (41%)	268	179 (69%)	82 (31%)	261

Table 7.13: DISTRIBUTION OF RESPONSES TO QUESTIONS ON WILLINGNESS TO PAY MORE FOR CHILD CARE BY RANGE OF FEE PRESENTLY PAID PAYING PARENTS ONLY

PHILADELPHIA AND SAN ANTONIO

RANGE OF FEE CURRENTLY PAID	WILLINGNESS TO PAY MORE FOR.....					
	The Same Service			More Service		
	Yes	No	TOTAL	Yes	No	TOTAL
Low	24 (77%) (23%)	7 (23%) (10%)	31 (18%)	22 (73%) (20%)	8 (27%) (16%)	30 (18%)
Medium	37 (63%) (36%)	22 (37%) (32%)	59 (35%)	37 (65%) (33%)	20 (35%) (39%)	57 (35%)
High	42 (52%) (41%)	39 (48%) (58%)	81 (47%)	53 (70%) (47%)	23 (30%) (45%)	76 (47%)
TOTAL	103 (60%)	68 (40%)	171	112 (69%)	51 (31%)	163

Table 7.14: DISTRIBUTION OF RESPONSES TO QUESTIONS ON WILLINGNESS TO PAY MORE FOR CHILD CARE BY SATISFACTION WITH FEE
PAYING PARENTS ONLY
LOS ANGELES

ATTITUDE TOWARD PRESENT FEE	WILLINGNESS TO PAY MORE FOR.....					
	The Same Service			More Service		
	Yes	No	TOTAL	Yes	No	TOTAL
Too High	0 (0%) (0%)	12 (100%) (32%)	12 (14%)	4 (31%) (6%)	9 (69%) (41%)	13 (15%)
About Right	28 (52%) (58%)	26 (48%) (68%)	54 (63%)	41 (79%) (65%)	11 (21%) (50%)	52 (61%)
A Little Low	20 (100%) (42%)	0 (0%) (0%)	20 (23%)	18 (90%) (29%)	2 (10%) (9%)	20 (24%)
TOTAL	48 (56%)	38 (44%)	86	63 (74%)	22 (26%)	85

Table 7.15: DISTRIBUTION OF RESPONSES TO QUESTIONS ON WILLINGNESS TO PAY MORE FOR CHILD CARE BY REPORTED ABILITY TO PAY MORE

TOTAL SAMPLE - PAYING PARENTS

ABLE TO PAY MORE	WILLINGNESS TO PAY MORE FOR.....					
	The Same Service			More Service		
	Yes	No	TOTAL	Yes	No	TOTAL
Yes	72 (72%) (46%)	28 (28%) (26%)	100 (37%)	78 (80%) (44%)	20 (20%) (24%)	98 (38%)
No	86 (51%) (54%)	81 (49%) (74%)	167 (63%)	100 (62%) (56%)	62 (38%) (76%)	162 (62%)
TOTAL	158 (59%)	109 (41%)	267	178 (68%)	82 (32%)	260

Table 7.16: REPORTS OF OTHER TYPES OF CARE SERIOUSLY CONSIDERED AND NUMBER REJECTED ON THE BASIS OF COST

PHILADELPHIA AND SAN ANTONIO

TYPE OF CARE	Number of times Considered	Percentage	Number Rejecting Based On Cost	Percentage*
In-home care by relative	9	4	5	56
In-home care by non-relative	12	5	3	25
Center-based care	77	32	1	1
Family day care by relative	2	1	1	50
Family day care by non-relative	14	6	0	0
Aggregate	114**	-	10	9

*Relative to the number of times the particular alternative type of care was considered.

**Although 114 considerations of other arrangements were reported, only 110 of the 243 respondents reported having seriously considered alternative types of care.

Chapter 8.0

CONCLUSION

8.1 Introduction

Family day care is an extremely significant phenomenon in the development of American social institutions. As the number of women entering the work force continues to increase, a concomitant need for child care arrangements, most often outside of the home, is created. Some working women may prefer day care centers, especially for the three- to five-year-olds, but too few of those centers offer care to infants, toddlers who are not yet toilet trained, or school age children. The family day care home, a traditional American institution, has become more important as it has proliferated in conjunction with the rising need for care for these and other young children.

Family day care has an additional, more general, societal importance beyond its significance for working women. The initial years of childhood are generally considered by experts in child development to be crucial in the formation of a child's character. Cast in this light, the family day care home may be perceived as having a major influence on the very nature of society.

For these reasons, it is very important, even at this early stage of the study of family day care, to attempt to surmise emerging central themes in the nature of this experience.

8.2 Parental Day Care Needs

Why do parents seek day care arrangements? The basic reason that National Day Care Home Study parents needed day care was to remain in the labor force; some required day care services in order to participate in training or educational programs. Slightly fewer Black parents needed child care to work than did Whites or Hispanics. The criteria for sample selection eliminated parents using incidental, drop-in, or periodic care. Therefore, such reasons as respite from child care responsibilities and freedom to shop did not figure prominently among the reasons for seeking child care.

It is evident that parents want their day care arrangements to fulfill a number of specific needs and expectations. Not surprisingly, parents mentioned caregiver reliability most frequently, but there was a remarkable, even thematic, ancillary wish for a day care environment that would foster conceptual and linguistic development. Parents wanted their children to be well-cared for, and therefore expressed a whole constellation of related concerns: emotional support for the children, socialization, good discipline, a safe and clean environment, and adequate opportunity to learn physical skills. The presence of a homelike atmosphere, one of the advantages of the family day care home most often attributed to it by advocates, did not figure prominently in what these parents were seeking in day care. Furthermore, parents did not seem to have many special needs for themselves or their children from day care. These might have included the need for long or unusual hours of service, the administration of medicines or other treatments related to health conditions, or special care required because of physical, mental, or emotional handicaps.

Considering the physical characteristics of day care, parents did not seem to find location and the attendant transportation requirement problematic, though quite a number used homes that were more than a few blocks distant from their residences. Among other physical characteristics, parents deemed adequate space, lighting, cleanliness, and an appropriate temperature in the home important; approximately nine in ten seemed satisfied with these aspects of the homes they were using. Parents did seem slightly more concerned about food served by caregivers than to many other characteristics.

Parents were also attentive to group size. While it had been anticipated that many parents would be concerned with limiting the numbers of children in the day care home, some, it became evident, were interested in ensuring that there would be enough children of appropriate ages to provide a valuable interactive experience for their children in the day care home. It was evident that parents would not recommend their caregivers to others when they believed that additional children would erode the quality of care.

Finally, parents typically expressed a preference for caregivers with more experience over those with more education or other formal training, if asked to make a hypothetical choice between caregivers possessing either of these two qualifications to the exclusion of the other.

8.3 Parental Choice

Given these general requirements, how did parents go about choosing a mode of care and a particular caregiver or caregiving institution?

8.3.1 Choice of Family Day Care

No single criterion predominated in the parents' selection of family day care over various forms of in-home or institutional care. Some criteria, such as the comparatively low cost of family day care, were primarily parent-centered, while others, such as the closer individual attention that family day care could provide their child, were primarily child-centered. However, many parents may have perceived that they had few, if any, other alternatives to family day care, as suggested by the finding that approximately 40% of study parents in Los Angeles did not perceive the availability of other forms of care. For these parents the choice was a forced one. R.C. Hill, writing on the day care market, has said that a cost-based criterion may be operative in propelling parents toward relative care, whether in or out of the home of residence, but he also indicated that, at the time of his writing, not enough was known about how parents go about choosing a form of care.

New information from the present study suggests several patterns in parental choices of family day care over other day care modalities:

- In all study sites it was found that very practical parent-centered and child-centered reasons were of great importance in choosing family day care, while fewer parents based their selection of family day care over center-based care on qualities of the particular caregiver. Once family day care was selected, however, caregiver qualities became the principal concern.
- Cost issues, noteworthy parent-centered concerns, were critical for fewer than one in five (17%) of the study parents. However, price increases might enhance the importance of these issues.
- Parents using sponsored care were typically assigned or referred to their caregivers by the sponsoring agencies. Those using regulated and unregulated care relied heavily on informal word-of-mouth referrals within their friendship and kinship networks.
- A substantial number of parents (41%) reported that they had seriously considered other kinds of child care arrangements before deciding to place their children in family day care. The alternative

most seriously considered, then rejected, was center-based care. The most frequent reasons for rejection were that the child was too young for a large group of children, that the center was too expensive, or that no positions were available in the center of the parent's choice.

- A considerable number of working respondents (13%) worked unusual hours--nights or variable schedules--and this apparently propelled them in the direction of family day care. This need seemed to be slightly more pronounced among Whites than among Blacks and Hispanics. A somewhat larger number of parents working unusual hours used unregulated care, intimating that more flexibility may be available in this regulatory category.

The result of these decision processes is that family day care emerges as the care of choice for a great many parents of two, three, and four year old children, with in-home care preferred for younger children, and center care or kindergarten for five-year-olds. Furthermore, it is clearly evident that family day care meets a need that cannot satisfactorily be addressed by centers or in-home care, even if these modalities of care were more abundantly available.

8.3.2 Choice of the Particular Caregiver

Once they have decided to make a family day care arrangement, parents must identify potential caregivers and select a particular one.

The major sources for identifying potential caregivers were personal. Parents relied heavily on friends and relatives, though some used advertisements placed by themselves or caregivers. Those using sponsored care, of course, were typically required to use the sponsoring agency. These sources seemed to serve parents well in many cases. However, there was an unsatisfied need for information concerning caregivers, as indicated by the overwhelming number of parents who said they would use a caregiver information service, if available.

Relatives who are potential caregivers are, of course, the easiest for parents to locate. Though only a minority of parents in the study were using care by relatives or close friends, it is believed that such care is actually far more extensive than the study sample, given the limitations of the sampling procedures, was able to reflect. If further research supports this, the government will need to recognize that, as regards a significant number of day care arrangements, its scope for regulation will likely be extremely limited.

Most basically, the particular caregiver selected by the parent was chosen because of her manifest personality traits and convenient location, because of referrals by other parents, and/or because she was a relative. Parents mentioned other reasons as well, such as the caregiver's teaching skill, experience, availability, or status as a friend or neighbor. None of these reasons for choice emerged as predominant, and for this reason it is difficult to bring the parental decision-making process into sharp focus. Beyond the question of the sheer availability of the given caregiver, there is a large intuitive or subjective factor at work in these decisions.

8.4 Parental Satisfaction

Once a parent enters into the particular arrangement, what is the level of the parent's satisfaction? Parents were, in the main, reasonably well satisfied with their family day care experience, and many reported that they and their children had received many unexpected benefits from the relationship. Nevertheless, a number said they had had one or more negative experiences with current or past arrangements, and some were concerned that their child's intellectual development was not being sufficiently promoted.

Furthermore, the level of parent satisfaction may have been overstated in this report because of the operation of several factors. First, the difficulty of locating caregivers and associated parents willing to participate in the study suggests that operators of the marginal homes where bad practices and dissatisfaction were likely to occur would probably have been among those unwilling to be interviewed. Second, parents may not have been willing to express the level of their dissatisfaction when the caregiver was a relative or close friend. Also, some parents, who knew they had to work and who perceived their current arrangement as the only one possible, may not have allowed themselves to acknowledge the degree of their dissatisfaction. Finally, parents who are dissatisfied with their arrangements may well remove their children from them within a few months.

8.5 Parents and Their Experience

Having examined why parents want family day care, what they expect of it, and what their level of satisfaction is, it will be useful to examine the shape of their experience with family day care. Who are the parents who typically use family day care services, and how are their experiences to be characterized?

8.5.1 Profile of the Parents

The parents in the study were young, most between 20 and 35 years of age. Their median age of 30 was consistent with the observed national increase in the age of parents with young children.

These parents typically had only one or two small children, with the child in family day care being between two and one-half and three years of age. These were normal children having few and limited special needs.

At the age of 30, study respondents earned below the median income for all U.S. families. However, they worked predominantly in clerical, managerial, and professional occupations, many of which may offer substantially more mobility than blue collar occupations, and were, moreover, somewhat more highly educated than the national norms. It can be anticipated, therefore, that they will, as a group, surpass the median income as they grow older and their careers develop. These characteristics may reflect some biases in the study sample of family day care users, which may not adequately represent blue collar workers and others in lower-paying occupations, who are certainly users of family day care. For this reason, conclusions drawn in this section are only tentative.

8.5.2 The Typical Experience

This effort to illuminate what is central for parents in the family day care experience is not representative of the variation in that experience, nor should it be. Rather, it calls attention to major dimensions of the phenomenon that may be used to characterize it.

Forty percent of study parents believed they had no other day care options for their young children, either because of the costs of in-home care and centers or because center placements for children of their child's age were not available. Many of these parents, however, preferred family day care because of the individual attention it offered their young children. To find their family day care arrangements, parents typically relied on their friends and relatives, emphasizing caregiver experience and reliability in the search. Indeed, confirming the importance of the friendship and kinship networks in their urban settings, parents often settled on a friend or relative as a caregiver.

Many parents had utilized previous day care arrangements, though quite a number had moved into family day care from some form of in-home care, most often provided by the parents themselves. Of those who had used a previous family day care arrangement, many had been dissatisfied and had withdrawn their children.

Many parents were pleasantly surprised by their experiences with a new family day care home, and were especially enthusiastic about the individual attention given their children. They were generally satisfied with their arrangement, though some were dissatisfied with the reliability of their caregivers and the amount of attention given to conceptual and linguisitic development. Only 5%, however, believed too many children were in the home. These parents appeared to be especially disturbed when there were too many children younger than their own. They found the costs, at 6% or 8% of their gross income, satisfactory; those with the ability to pay more were most often unwilling to do so.

This is a positive picture of the family day care experiences of the study parents, but parental experience is not entirely satisfactory, most particularly when one considers that many parents felt they had no alternative to this form of day care. A substantial percentage of parents preferred center-based care for their children. It is conceivable that had parents perceived other options, a higher level of dissatisfaction might have materialized.

A few differences became apparent in experiences and attitudes among parents of different ethnicities and among those who used homes of different regulatory types. Though most parents of all ethnic groups were concerned with the conceptual and linguistic development of their children, Blacks and Hispanics seemed more intensely interested in this aspect of family day care, a fact which accords with the strong interest among these minority groups in education as the gateway to upward social mobility. More Black parents in Philadelphia and San Antonio preferred center-based care than did Whites or Hispanics. Black and Hispanic parents also seemed more interested in having structured activities in the home. Users of sponsored care also were more interested than others in having their children exposed to focused learning experiences, which may be attributable either to the programmatic emphasis on learning in some sponsored homes, or to the tendency of parents having this interest to select sponsored care.

8.6 Implications for Regulation and Support

A comprehensive image of a family day care user emerges from this analysis: a struggling young parent trying to advance herself and her family by going to work or seeking additional training or education. Her high aspirations for herself and her family are reflected in her strong interest in positive learning programs for her young children. With her complex and sometimes burdensome responsibilities and ambitions, she understandably wishes to avoid the additional problems generated by having to deal with unsatisfactory child care arrangements. Caregiver reliability and the ability of the caregiver to provide an appropriate environment for her child are her priorities.

Many such respondents, who liked family day care but held some reservations about it, seemed to believe that day care homes could be improved if caregivers were somehow more educated and reliable. Caregiver training programs, then, are clearly an area of support suggested by the results of this study. Such programs have generally been associated with sponsored care, and have been promoted as requirements for caregivers wishing to remain within the controlled system of sponsorship. Given the great preponderance of largely informal and unregulated day care institutions, however, special programs should likely be developed that could enhance learning and reliability among caregivers without threatening the integrity and proper functioning of these institutions.

Parents, additionally, require support that will focus more directly upon them, that will assist them to cope more successfully and easily with meeting their day care needs. Some may now receive such assistance from friends and relatives, but others, especially those who are comparatively isolated, with no extended families, may not have adequate social resources to deal with their difficulties. All parents can profit from assistance at times. For example, such assistance might be directed at providing services to augment parental skills in assessing day care, and at providing child care information and referrals.

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APPENDIX

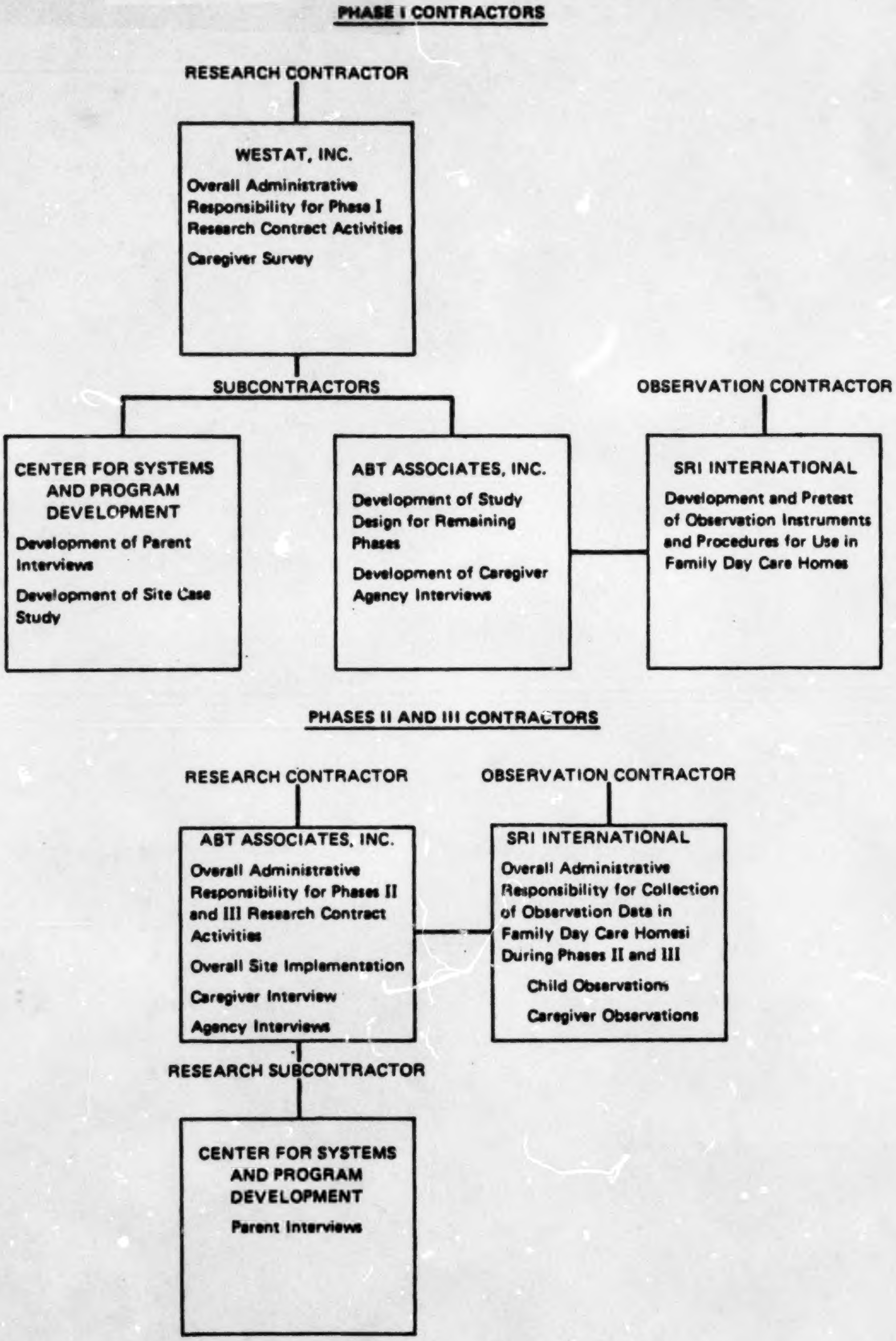
PHASE I CONTRACTORS
RESEARCH CONTRACTOR
WESTAT, INC.
Overall Administrative Responsibility for Phase I Research Contract Activities
Caregiver Survey
SUBCONTRACTORS
OBSERVATION CONTRACTOR
CENTER FOR SYSTEMS AND PROGRAM DEVELOPMENT
Development of Parent Interviews
Development of Site Case Study
ABT ASSOCIATES, INC.
Development of Study Design for Remaining Phases
Development of Caregiver Agency Interviews
SRI INTERNATIONAL
Development and Pretest of Observation Instruments and Procedures for Use in Family Day Care Homes
PHASES II AND III CONTRACTORS
RESEARCH CONTRACTOR
OBSERVATION CONTRACTOR
ABT ASSOCIATES, INC.
Overall Administrative Responsibility for Phases II and III Research Contract Activities
Overall Site Implementation
Caregiver Interview
Agency Interviews
SRI INTERNATIONAL
Overall Administrative Responsibility for Collection of Observation Data in Family Day Care Homesi During Phases II and III
Child Observations
Caregiver Observations
RESEARCH SUBCONTRACTOR
CENTER FOR SYSTEMS AND PROGRAM DEVELOPMENT
Parent Interviews

FIGURE A-1 STUDY ORGANIZATION

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